

ARIZONA SUPREME COURT ADMINISTRATIVE OFFICE OF THE COURTS



YUMA COUNTY ADULT PROBATION

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FY 2020

Operational
Review

Final Report

July 2020

**Yuma County Adult Probation Department
Operational Review Final Report**

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EXECUTIVE SUMMARY

Overview

Arizona's adult probation system is decentralized, with each of the 15 local probation departments reporting directly to the presiding judge of the superior court or court administrator in their respective county. In accordance with the administrative and supervisory authority established under Article VI, Section 3 of the Arizona Constitution and in cooperation with the local probation departments, the AOC has developed and implemented a comprehensive operational review process.

Objective

The Adult Probation Services Division (APSD) operational review team conducts reviews in accordance with the Arizona Judicial Department's *Justice for the Future: Planning for Excellence* strategic agenda. Operational reviews assess and document adult probation departments' operational and program performance to assist in building effective community supervision practices. The objective of the review team is to ensure accountability and compliance with Arizona Revised Statutes (A.R.S.), the Arizona Code of Judicial Administration (ACJA), Administrative Orders (AO), Administrative Directives (AD), Arizona Rules of Court, approved program plans, funding agreements, and local policies and procedures. The review is designed to identify areas of non-compliance and make recommendations for corrective action, while promoting an atmosphere of collaboration and facilitation of technical assistance. To this end, the review team inspects the department's policy manual and response to the Self-Assessment Questionnaire (SAQ), reviews case files, program files, and all correspondence and reports submitted to the APSD. The review team also conducts Minimum Accounting Standards (MAS) and Firearms verifications with appropriate staff working with MAS and Firearms/Ammunition and Defensive Tactics.

The on-site portion of the Yuma County Adult Probation Department operational review was conducted November 4 – 5, 2019. Pre-review work began in March 2019. The review team consisted of Carol Banegas-Stankus, Jane Price, and Carissa Moore.

Recommendations are provided in areas where less than 100 percent compliance is achieved. A department response is not required in areas with 90 percent or above compliance; however, feedback is always welcome and very much appreciated. After the final report is published, the review team and APSD staff will work collaboratively with the department to develop a corrective action plan that will assist the department in resolving identified in the report.

Responses received from the department are incorporated into the report verbatim. When a typographical error is contained in the department's response *[sic]* is used to indicate that something incorrectly written is intentionally left as it was in the original verbatim statement.

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List of Accomplishments in FY 19 to Present

- “Our biggest accomplishment this year was the opening of the North End Community Connections (NECC) clinic. Since June of 2018, we have referred nearly 650 probationers and have a current enrollment of over 500. The NECC is a fully integrated behavioral health and medical clinic completely housed within the adult probation office. The clinic consists of approximately 18-20 staff including intake services, health care case managers, scheduling nurses, a family nurse practitioner[sic], peer support services, financial services, scheduling receptionist, pharmaceutical rep, and tele-med psychiatrist. To improve communication between the clinic and probation, justice teams were developed between 2-4 probation officers and one case manager. The justice team concept ensures that rapport and relationships are created between probation staff and treatment staff to improve development and delivery of needed treatment services. The department has been fortunate enough to provide numerous presentations throughout the state on the development of this clinic and it was considered the “gold standard” of integrated clinics by AHHHCS.
- To increase collections of court ordered assessments, including probation service fees, the department partnered with the Clerk of Superior Court to implement a Point and Pay system which is an automated receipting program that allows us to take credit/debit card payments for court ordered fees. Further, our financial support staff have been put through the Role Clarification Training of EPICS and have begun to be much more active in the collection of fees by calling delinquent probationers, reminding them of our ability to take credit card payments and online payments, and scheduling in office meetings with individual probationers to develop payment plans and explain their financial obligations per their conditions of probation.
- In September 2018, the department obtained approval from the Yuma County Board of Supervisor to participate in the AmeriCorps program through the Administrative Office of the Courts. Originally, the department was only scheduled to receive two 24 hour/week members for the entire 2018 – 2019 year. However, through successful implementation of the program and department contacts with the Arizona State University-Criminal Justice Program in Yuma, the department secured one additional 20 hour/week member and another 30 hour/week member. As a result, the department received the benefit of 1440 AmeriCorps member hours in 2018 -2019. The members completed DNA audits of the entire department, audited case files for yearly criminal history checks, and completed petitions for discharges among other things. In addition, they obtained knowledge of probation department functions, the goals of supervision, the role of EPICS in supervision, and a general overview of the role of community corrections in the criminal justice system.
- In June 2019, the department reinstituted an internship program. We were able to partner with a Yuma student who is attending Bob Jones University. This student completed 120 hours of an internship and gained valuable knowledge of probation department functions, the goals of supervision, the role of EPICS in supervision and a general overview of the role of community corrections in the criminal justice system.
- The department instituted a Jail Release Plan process to improve collaboration between the probation department and community providers to ensure basic needs were being met and

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appointment dates were being scheduled prior to probationer release from incarceration. A form was created through collaborative input from probation, community partners, and Arizona Complete Health to develop consistency. Procedures were put in place at the pre-sentence level to notify release plan providers of defendants who are incarcerated and needing a plan. Efforts were made to ensure that probationers were not being released to the street, but instead had a peer support or other agency partner at the jail to pick them up and provide transportation to the probation department and integrated health clinic. By doing so, we are trying to create an immediate engagement opportunity with peer support, the treatment agency and probation to capitalize on any internal motivation for change that the probationer might have upon their release.

- The department currently has partnered with Goodwill of Arizona to provide employment workshops in the probation office once per month for probationers who are unemployed or have a poor employment history. The workshops are followed up with individual meetings each Monday with a Goodwill representative to work on resumes, provide individual feedback, and support. Goodwill was successfully awarded a grant that allowed them to purchase 12 laptops, a portable wifi/sic, and a printer. Utilizing this new equipment, Goodwill is able to provide each probationer with real-time online access to their web service, resources and form documents.
- One staff member completed the 12 month leadership academy through the American Probation and Parole Association.
- Our pre-sentence unit members were cross-trained with our pretrial services unit this past year to assist with vacancy coverage and to ensure that services were uninterrupted.
- The presentence unit filed 1,079 presentence reports had a 100% on time filing of reports (within 2 days of sentencing).
- Pretrial services had an on-time filing rate of 99%, despite numerous vacancies.
- Three staff members became EPICS coaches this year.
- Three staff members became Helping Explore Alternative Lifestyle (HEAL) facilitators this year.
- Two supervisors completed the Maricopa County Leadership Academy and one began and is currently participating.
- All of our GPS units were updated to the newest technology allowing for easier compliance with program rules through exchangeable batteries to ensure continuous tracking.
- We reviewed and made improvements to our Case File Quality Assurance document to remove redundancy and include questions on case plan growth as goals are achieved and financial accountability.
- Our office has begun to actively participate in the prison re-entry program, attending meetings/training for this endeavor with two dedicated staff who will oversee this process.
- Our department has provided cross-training to several community agencies this year to educate our partners on the role of probation, the criminal justice process, the expectation of those placed on supervision and the goals we are striving for in reducing returns to jail, use of the local hospital as primary medical care, and revocations to prison. We've educated these partners on the importance of communication between our agencies to ensure that the positive and compliant behavior and growth with our probationers is being properly recognized and used to evaluate their level of supervision and need for continued supervision. These cross trainings have included topics like Risk, Need, and Responsivity and other evidenced based practices being utilized by adult probation (EPICS, MI) to

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improve success. Likewise, our community partners have provided us with training on their roles, resources and knowledge of the provider and insurance (AHCCCS) network and responsibilities.

- Our office coordinated with AOC to provide re-entry simulations to APO employees, county staff and our community partners. This was extremely powerful and utilized the assistance of current and former probationers as role players to provide authentic feedback to the staff who participated.
- All officers were trained in the administration of Naloxone and provided kits to carry with them in the field and at their workstations. Training was provided by Sonoran Prevention Works and Yuma Police Department and the medication was obtained through the governor's office.
- Meetings resumed to implement medically assisted treatment care in the Yuma County Detention Facility. Currently, anyone on an *[sic]* MAT protocol who enters the jail has this treatment suspended. Through partnerships with Community Bridges, Inc., the Yuma County Sheriff's Office, and Community Medical Services, we are nearly ready to begin a pilot program in the jail where current probationers receiving MAT services in Yuma County will be able to continue those services should they end up in jail for any new offense or probation related incarceration. Pregnant females with an opioid use disorder will also be offered services in an effort to protect the pregnancy and unborn child from opioid withdrawal. Should the pilot be a success, implementation of MAT services for inmates who do not enter on an *[sic]* MAT protocol will be next.
- Drug Court participant employment rate has continued to average 85% and 99% of the substance abuse testing returns as negative for illegal substance use.
- Drug Court graduates received a certificate recognizing their success in the program from Arizona Representative Tim Dunn for the past two graduations in February and May.
- Drug Court continues to coordinate panels of former graduates to provide their testimony and experience in the program to college students enrolled at Arizona Western College, Arizona State University, and/or Northern Arizona University.
- In 2019, the Yuma County APD opened a "Success Closet" full of casual and business attire, basic toiletries, and some non-perishable food items, for probationers to have should they be in need for any reason. This closet is full of staff donated articles of business attire, left over hotel toiletries, and other gently used clothing."

Overall Conclusion

Number of Standards Met:	84
Number of Standards Not Met:	68
Number of Standards Not Applicable:	26

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ADMINISTRATION AND MANAGEMENT

Each probation department fulfills a variety of general administrative and management functions which directly effects the Department's performance and effectiveness in its supervision of probationers. Many of these functions are accomplished in accordance with statutes, the ACJA, AOs, ADs, funding agreements, and local policies and procedures. The review team assessed the Department's compliance with administrative and management functions in the following areas: departmental policies and procedures, officer certification, education and training requirements for Department staff, general reporting obligations, MAS, supervisory case file review, and pre-sentence investigation (PSI) reporting.

The following Findings Key is used throughout the report to reflect the Department's compliance with each of the review areas:

Findings Key:

Meets Standard: Substantial compliance with the standard for the relevant review period. Must meet a compliance of 100%-90%

Does Not Meet Standard: Requires corrective action when compliance is 89%-0%

Compliance Rating Not Applicable: A compliance percent is not given to a specific area of review

Policies and Procedures

Pursuant to [ACJA § 6-105\(D\)\(2\)\(b\)](#)

The AOC, APSD Subject Matter Experts reviewed policies from the Department's policies and procedures manual. Results of the review are as follows:

POLICY AND TITLE	RECOMMENDED REVISIONS
1.21 Use of State, County, or Private Vehicles	I. Operator Requirements. A. 5. Recommend adding "(by the next business day for state vehicles)" after the language "...in a timely manner..." VIII. State/County and Privately Owned Vehicles. E. 2.a. Recommend deleting the word "Notify" and replace with the following language, "Submit a loss report to the AOC..." XI. Damage and Repair of State/County Vehicles. B. Recommend deleting the words "or taxi" and "rental" from this section. XIII. Maintenance and Fuel of State/County Vehicles. B. 1.c. Recommend deleting "DOA" and replacing with "ADOT". XIII. Maintenance and Fuel of State/County Vehicles. B. 3.a.i. A loss report is not required by the AOC for a lost or stolen

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POLICY AND TITLE	RECOMMENDED REVISIONS
	credit card. Notification by email is acceptable.
3.00 Principles of Evidence Based Supervision	<p>Section 1. Assess Risk/Needs, paragraph five, second sentence Recommend revising “It is also used to develop case plans, level of supervision, and treatment needs.” to read “It is also used to determine level of supervision, treatment recommendation, and assist in the development of case plans.”</p> <p>Section 2. Enhance Intrinsic Motivation Recommendation to consider adding EPICS II skills as an additional method since the Department is already engaged in this core correctional practice.</p>
3.01 Probation Assessments and Case Plans	<p>I. Assessments. A. Standardized Assessment. APETS document link. http://ajinweb/apets/APETS_Admin/Statewide-APETS-Policy-APPROVED-111005.pdf</p> <p>Second sentence. Recommend revising the word “it” to “the assessment score...”</p> <p>II. Case Plans. A. Recommend revising first sentence to read “The initial case plan will be completed within sixty days (thirty days for IPS clients) from sentencing or release from custody for all probationers...”</p> <p>Recommend revising third sentence to read “The officer shall ensure the case plan includes signatures of the officer (and surveillance officer if applicable) and probationer objectives are in the case plan S.M.A.R.T. (Specific, Measurable, Affirmative, Realistic, and Time-lined).”</p> <p>II. Case Plans. B. Recommend revising #2 to read “The probationer is approved for intercounty or interstate transfer within 60 days (SPS) or 30 days (IPS) of sentencing or release from custody.”</p> <p>Recommend revising #3 to read “The probationer is approved for intercounty transfer within 60 days (SPS) or 30 days (IPS) of sentencing or release from custody to residential treatment.</p> <p>II. Case Plans. E. Recommend revising the 180 days requirement mentioned in the first and third sentences to “12 months” per code revision.</p>
3.05 Sex Offender Management	<p>VII. Supervision Standards and Level Descriptions for Standard Probation. B. and D. Recommend revising the 180 day requirement to 12 months per code revision.</p> <p>VII. Supervision Standards and Level Descriptions for Standard Probation. F. Recommend adding “...determines necessary, but at a minimum pursuant to ACJA 6-201.01 and 6.202.01.”</p>

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POLICY AND TITLE	RECOMMENDED REVISIONS
	IX. Travel Permits for All Sex Probations. Recommend revising to Travel Permits for all Sex Offenders.
3.12 Transfer of Jurisdiction	This policy pertains to the transfer of jurisdiction. However, throughout the policy reference is made to “courtesy transfer” which is addressed in a different policy. II. Outgoing Transfers. E. Recommend revising “...prior to the completion of a transfer investigation...” to “...prior to the completion of a transfer of jurisdiction...”. III. Incoming Transfers. A. Recommend revising “...transfers of courtesy supervision...” to “transfers of jurisdiction...”. III. Incoming Transfers. A. 8. Recommend revising “...within 15 days after the inter-county courtesy transfer request...” to “within 15 days after the transfer of jurisdiction...”. III. Incoming Transfer A. 9.b. Recommend deleting the language “...or courtesy”.
3.13 Intercounty Courtesy Transfers	The effective date reference in this policy is July 31, 2012. However, ACJA 6-211 was revised October 3, 2018. Recommend updating policy.
3.14 Global Positioning System	Authority. Recommend adding ARS 13-902 (G) and 13-3725 and AD 2011-41. Recommend updating policy to reflect BI, Inc. and Total Access Monitoring System. IV. Termination from GPS. B. The current language in this section is stricter than statute. Recommend updating this practice to ensure congruent with current practice and policy (EBP, Graduated Responses, Sanctions Matrix, etc.)
3.15 Interstate Compact Supervision	Incoming Interstate Compact Procedures. A. Last sentence. Recommend adding the language “...and victim compensation and assistance fund to establish...”. Incoming Interstate Compact Procedures. C. First sentence. Recommend deleting the word “annually” per Rule 4.106 2017 revision. Incoming Interstate Compact Procedures. D. First sentence. Recommend deleting the word “volatile” as it is not ICAOS language. ISC Eligibility Guide. C. Recommend adding language regarding the transfer of military veterans per Rule 3.101-1 (5).
3.23 Probation Absconders	I. General Guidelines. A. 1. e. Recommend deleting section e. A certified letter is no longer a

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POLICY AND TITLE	RECOMMENDED REVISIONS
	code requirement. I. General Guidelines. A. 2. The language "...not located within 30 days..." is a higher standard. Code requirement is 90 days.
3.36 Evidenced Based Standard Probation Supervision	I. Supervision Requirement. Recommend referencing ACJA 6-201.01 with regards to minimum contact requirements for high risk, medium risk, and low risk as code has been revised. I. Supervision Requirement. Recommend deleting 10. Same requirement as stated in 6.
3.42 Transferred Youth and Youthful Offenders	Definitions: Title XIX Recommend revising "Arizona Health Cost Containment System (AHCCS)" to "Arizona Health Care Cost Containment System (AHCCCS)." II. Supervision Strategy. B. Treatment. 1. Recommend revising "Kid Care" to "KidsCare". II. Supervision Strategy. C. Education. 1. Recommend revising the word "Offenders" to "Youth" per statute language.

Noteworthy: The Department submitted all requested policies for AOC, APSD subject matter experts (SMEs) to review, comment on, and recommend revisions.

Department Response: "All recommended revisions made, and policies updated. Acknowledgement of policy revision signed by all staff."

Required Corrective Action: None required

Recommendation: The quality assurance process can include the Department conducting an annual review of ACJA revisions and ensuring that policies are revised accordingly. Also, a training component for officers and staff can be included in the quality assurance process.

Employment

Pursuant to [ACJA § 6-106\(H\)\(3\)\(b-c\)](#), [\(F\)\(3\)\(a\)](#), and [\(H\)\(1 through 8\)](#)

Personnel files for 17 probation officers were selected for review. Of the 17 personnel files, 16 were new hires falling within the pre-employment parameters. The results are as follows:

Employment Qualification Review					
Requirements	Yes	No	N/A	% Compliance	Meets Standard
Verification of bachelor's degree-for PO	16	0	1 ¹	100%	<input checked="" type="checkbox"/>

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Employment Qualification Review					
Requirements	Yes	No	N/A	% Compliance	Meets Standard
Verification of high school diploma/GED for SO	1	0	16 ²	100%	<input checked="" type="checkbox"/>
National and State Criminal History check before hire	17	0	0	100%	<input checked="" type="checkbox"/>
Before hire, was a driving records check through AZ MVD and any other previous state of residence conducted	17	0	0	100%	<input checked="" type="checkbox"/>

¹ N/A includes surveillance officers.

² N/A includes probation officers.

Noteworthy: The Department did an excellent job in meeting minimum code compliance in all four review areas.

Department Response: None required

Required Corrective Action: None required

Officer Certification/COJET/Training

Pursuant to [ACJA §§ 6-104 \(F\)\(1\) and 6-106 \(J\)\(1\)\(b\)](#) adopted via [AO 2006-99](#), [ACJA §§ 1-302\(K\)\(4\), 6-104 \(G\)\(1\)\(a\)](#), and [6-107 \(E\)](#)

Personnel files for 17 probation officers were selected for review. The results are as follows:

Officer Certification Training					
Requirements	Yes	No	N/A¹	% Compliance	Meets Standard
Eight (8) hours of officer safety training within 30 days of appointment	17	0	0	100%	<input checked="" type="checkbox"/>
Completion of PO Certification Academy within one (1) year of the date of hire/date in position	15	0	2	100%	<input checked="" type="checkbox"/>
Certification requested by CPO after one (1) year of service has been completed from hire date/date in position	11	3	3	79%	<input type="checkbox"/>
Completion of IPS Academy within one (1) year of assignment	0	0	17	N/A	<input type="checkbox"/>

¹ Includes new hires with less than 1 year of service at time of operational review, terminations prior to one year of service, hire date of more than 1 year prior to last review, and/or Chief Probation Officer (CPO).

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Noteworthy: The Department achieved compliance in two of the four review areas; one review area is not applicable.

Department response: “The responsibility to request the Probation Officer Certification by the CPO has been a responsibility of our HR Specialist. The department went without an HR Specialist for approximately 3.5 months in 2019 before being able to fill the position. Upon hiring HR Specialist Jennifer Domingos, she was not advised of this responsibility. This has since been corrected and the HR Specialist is now aware. I have sent her an email to confirm her acknowledgment of this expectation for the purposes of the OP Review and attached that email here.”

Required Corrective Action: None required

Required Corrective Action: Include the development and utilization of a training records checklist, personnel checklist, or an annual personnel review checklist in the Department’s quality assurance procedure.

Continuing Employment

Pursuant to [ACJA § 6-106 \(J\)\(1\)\(f\)](#), [ACJA §1-302](#), and [ACJA § 6-107\(h\)\(7\)\(a\) & \(b\)](#)

Personnel files for 17 probation officers were selected for review. The results are as follows:

Biannual Criminal History & Annual MVD Check					
Requirements	Yes	No	N/A ¹	% Compliance	Meets Standard
Criminal History Check Every 2 Years	17	0	0	100%	<input checked="" type="checkbox"/>
If the employee operates a state/county/personal vehicle, were annual MVD reviews conducted	17	0	0	100%	<input checked="" type="checkbox"/>

¹N/A includes officers with less than one year of services or terminated prior to one year of service.

Continuing Education (COJET) ¹					Meets Standard
Requirement	Yes	No	N/A ²	% Compliance	
2018 Annual Continuing Education Requirement	50	0	5	100%	<input checked="" type="checkbox"/>

¹Includes all probation and surveillance officers within the Department.

²N/A includes exempt officers.

Noteworthy: The Department achieved 100 percent compliance in all three review areas.

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Department response: None required

Required Corrective Action: None required

Firearms

Pursuant to [ACJA § 6-113](#)

Of the 17 probation officer personnel files selected for review, 12 are armed officers. The results are as follows:

Firearms						
Requirements	Yes	No	Total	N/A ¹	% Compliance	Meets Standard
ACJA § 6-113(E)(1); Officer submitted written request to carry to CPO	12	0	12	0	100%	Y
ACJA § 6-113(E)(4); CPO acts on officer initial request to carry within 30 days	12	0	12	0	100%	Y
ACJA § 6-113(E)(g)(1-7); Officer signs form attesting to 7 Items	12	0	12	0	100%	Y
ACJA § 6-113(E)(2)(a); Officer completed psychological testing	12	0	12	0	100%	Y
ACJA § 6-113(E)(2)(b); Criminal history records check completed	12	0	12	0	100%	Y
ACJA § 6-113(E)(2)(c); Officer completed defensive tactics training	12	0	12	0	100%	Y
ACJA § 6-113(E)(2)(d); Officer signed form indicating medically/physically able to perform armed officer duties	12	0	12	0	100%	Y
ACJA § 6-113(E)(2)(e); Officer completed Firearms Training Academy	12	0	12	0	100%	Y
ACJA § 6-113(E)(2)(f); Officer completed competency test & training course on ACJA 6-112 & 113	12	0	12	0	100%	Y
ACJA § 6-113(G)(3); CPO approves/disapproves request to carry within 30 days after officer completes all requirements	12	0	12	0	100%	Y

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Firearms						Meets Standard
Requirements	Yes	No	Total	N/A¹	% Compliance	
ACJA § 6-113(H)(1); Officer signed form indicating an understanding of the terms & conditions in code and any department policy regarding use of firearms	12	0	12	0	100%	<input checked="" type="checkbox"/>
ACJA § 6-113(G)(4)(5); For denial, temporary suspension or revocation to carry, CPO must provide written reasons, place in personnel file, & copy officer & officer's supervisor	0	0	0	0	N/A	<input type="checkbox"/>
ACJA § 6-113(H)(3); Completed annual re-qualification & participated in all required practice sessions	11	0	11	1	100%	<input checked="" type="checkbox"/>

¹N/A includes not armed, carry for less than a year, hired 1 year prior to last op review, or is the CPO.

Noteworthy: The AOC, APSD commends the Department for achieving 100 percent compliance in all review areas above.

Department response: None required

Required Corrective Action: None required

Pursuant to [ACJA § 1-302\(K\)\(6\)](#)

Code Standard for CPO Training	Meets Standard
Every chief probation officer shall attend at least one program conducted out-of-state or in-state by an established, nationally recognized training organization every three years.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Noteworthy: The AOC, APSD commends the Department for meeting standard in the CPO training review area.

Department response: None required

Required Corrective Action: None required

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Minimum Accounting Standards (MAS)

Pursuant to [ACJA §§ 1-401\(E\)\(1\), \(E\)\(4\), \(F\)\(2\), \(F\)\(10\), and \(F\)\(12\)](#)

Meets Standard:	<input checked="" type="checkbox"/>
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The AOC, Court Services Division (CSD) provided the operational review team with a copy of the Department's most recent MAS Compliance Checklist form (Reporting Year 2018). The MAS Compliance Checklist was submitted by the Department and received by CSD on time (March 1, 2019). The Department's triennial audit conducted for fiscal year ending June 30, 2018 reported no exceptions were found.

According to the MAS Compliance Checklist and the on-site verification on November 5, 2019 by operational review lead specialist, the Department has an automated financial system (QuickBooks) to ensure accurate reporting of all transactions. The Department's current policy is to accept cashier's checks, money orders, and credit cards from probationers for the payment of probation service fees (PSF), restitution, and other court ordered fines.

Probationer payment receipts are generated by the automated financial system. All payments received by Department staff during business hours are immediately placed in a locked drawer. At the end of each business day a reconciliation of payments against receipts is conducted by authorized staff and verified by another authorized staff member. Payments are kept overnight and properly secured by first placing payments in a locking bank bag and then storing the bank bag in a secure and immovable safe. The morning of the next business day an authorized Clerk of the Court staff member collects the locked bank bag for deposit by the Clerk of the Court.

Pursuant to ACJA 1-401, the following visual verifications were conducted by the operational review lead specialist: physical restrictions are in place between the public and the area where monies and financial records are stored; the use of an immovable safe for storage, the use of locking bank bags, and the Department's acceptance of payments policy is posted in the lobby area.

Noteworthy: The Department does an excellent job in safeguarding all financial records and payments as required by Administrative Order No. 97-62 and ACJA 1-401.

Department Response: None required

Required Corrective Action: None required

Financial and Statistical Reports

Pursuant to [ACJA §§ 6-201.01 \(F\)\(12-13\), \(F\)\(16-17\), 6-202.01 \(F\)\(10-11\), and \(F\)\(14-15\)](#)

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According to the AOC, APSD Finance Department, mid-year and closing reports were received from the Department on time and accurately. Monthly budget reports were also received in proper format within specified time frames.

Code Standard for Financial	Meets Standard	
Closing financial and program activity reports through December 31, 2018 submitted to the AOC by January 31, 2019.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Closing financial and program activity reports through June 30, 2019 submitted to the AOC by August 31, 2019.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

According to the AOC, APSD Data Statistical Specialist, annual hand count reports and performance measures were submitted on time during FY 2019.

Code Standard for Statistical Reports	Meets Standard	
Probation Departments operating an IPS program shall maintain and provide to the AOC data and statistics as may be required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Probation Departments providing standard probation services shall maintain and provide to the AOC data and statistics as may be required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
On request, Chief Probation Officer shall conduct hand counts of the Department's IPS population and shall submit results of the hand counts.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
On request, Chief Probation Officer shall conduct hand counts of the Department's standard probation population and shall submit results of the hand counts.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Noteworthy: The Department is commended for meeting standard compliance in all review areas.

Department response: None required

Required Corrective Action: None required

Pre-sentence Report (PSR)

Pursuant to [Arizona Rules of Court 26.4\(B\)](#)

For FY 2019 (July 1, 2018 to June 30, 2019), the Department reported that 1,079 PSRs were completed; **99.5%** were submitted to the Judge within two business days of sentencing¹. According to performance measures reported by the Department during this timeframe, the lead operational review specialist verified that 1,001 PSRs were completed.

Meets Standard: <input checked="" type="checkbox"/>

¹Operational Review compliance rating is based on data provided by the Department on the Self - Assessment Questionnaire.

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Noteworthy: The Department did a good job meeting standard compliance in this review area.

Department response: None required

Required Corrective Action: None required

Recommendation: The Department may utilize the PSR APETS data report to compare with monthly performance measures submitted to APSD; the reports assist to confirm accurate reporting of completed PSRs. It is recommended that the Department compare the PSR APETS data report with the monthly performance measures to ensure accurate reporting.

Fleet Management

Pursuant to [ACJA § 6-111](#), [A.R.S. § 38-538.02](#), and the [AZDOA R2-15-202](#)

According to the AOC, APSD, the Department's compliance with fleet management requirements are as follows:

Code Standard for State Fleet	Meets Standard	
Department maintains a vehicle database or log that shall include but is not limited to names of operators and locations of vehicles.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Department conducts annual Motor Vehicle Department (MVD) reviews of all department employees that operate a state vehicle.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
The Chief Probation Officer shall delegate management of the Department's state vehicles to an employee of the Department.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
State vehicle damage or loss is reported to the AOC and ADOA Fleet Management within the next business day.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Noteworthy: The Department does well with meeting standard compliance for A.R.S., ACJA, and ADOA rules in all four review areas.

Department Response: None required

Required Corrective Action: None required

COMMUNITY PROTECTION

The Department has a responsibility to enhance public safety through careful supervision and monitoring of individuals receiving a suspended sentence. The review team assessed the Department's compliance with these criteria in the following areas:

- Minimum contact standards for standard supervision cases
- Minimum contact standards for intensive supervision cases

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- Minimum contact standards for sex offender cases
- Management of absconder cases
- Victim notification requirements

Tracking System

Pursuant to [ACJA § 6-201.01\(J\)\(4\)](#), [ACJA § 6-202.01\(L\)\(1\)\(e\)](#), and [Statewide APETS Policy - Minimum Use Mandates \(B\)\(1\)](#)

Per the current APETS policy, changes to contacts/case notes must be made within 72 business hours¹ of the receipt of the new information for all active probationers. During July 1, 2019 through September 30, 2019 there were 18,921 total contacts. Information in APETS revealed the following:

The following table is for informational purposes only.

Contacts/Case Notes Entered within 72 Hours			
Requirements Met	July 2019	August 2019	September 2019
Yes	4,629	5,672	4,419
No	1,545	1,352	1,305
Total	6,174	7,024	5,724
% Compliance	75%	81%	77%
Meets Standard	NA	NA	NA

¹The current Late Contact Entry Report APETS script generates data using 3 calendar days including weekends and holidays parameter instead of within 72 business hours excluding weekends and holidays.

Department Response: “New staff will be trained utilizing the revised Probation Officer Training Schedule. The APETS Coordinator will run the Late Contact Entry Report in APETS on a monthly basis and provide to supervisors to address with staff and use as a reminder in unit meetings.”

AOC Response: The Operational Review team inquired of the AOC, APSD Information Technology team who advised the current Late Contact Entry Report APETS script generates data using 3 calendar days including weekends and holidays parameter instead of within 72 business hours excluding weekends and holidays. Therefore, until the script is modified to align with the APETS policy, an operational review compliance rating will not be provided.

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include utilizing the Late Contact Entry Report in APETS on a quarterly basis, reminding officers during staff meetings, and/or by adding contact reviews to the supervisor file review checklist.

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Standard Probation Supervision (SPS) Contacts

Pursuant to [ACJA §§ 6-201.01\(K\)\(8\)\(a\), 6-201.01\(K\)\(6\), and 6-201.01\(K\)\(4\)\(a, b\)](#)

A review of 64 SPS case records was conducted. The period reviewed was July 2019, August 2019, and September 2019. Of the 64 case records reviewed for the three-month review period, on average, 14 were maximum supervision, 42 were medium supervision, seven were minimum supervision, and one case was not applicable during the review period.

To determine if supervision contact requirements were in compliance with ACJA, a review of residence, office, and field contacts was conducted. Credit was not given for a collateral contact if the APETS contacts/case notes screen did not contain meaningful dialogue with the person. The review team determined if a case met required contacts based on level of supervision (yes), did not meet required contacts based on level of supervision (no), or that the number and type of contacts was not applicable (N/A).

A total of 276 contacts were reviewed and information in APETS revealed the following:

SPS Contacts - Minimum Level Supervision²			
Requirements Met	July 2019	August 2019	September 2019
Yes	5	6	6
No	0	0	0
N/A ¹	1	1	1
Total	6	7	7
% Compliance	100%	100%	100%
Meets Standard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

¹NA includes probationers whose SPS start date was the following month and/or was in jail during the review period.

²Information regarding supervision level was obtained from the APETS Supervision History Screen. Total number of probationers may change from month to month based on subsequent changes in supervision level.

SPS Contacts - Medium Level Supervision²			
Requirements Met	July 2019	August 2019	September 2019
Yes	36	35	23
No	4	5	17
N/A ¹	2	2	1
Total	42	42	41
% Compliance	90%	88%	58%
Meets Standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¹NA includes probationers whose SPS start date was the following month and/or was in jail during the review period.

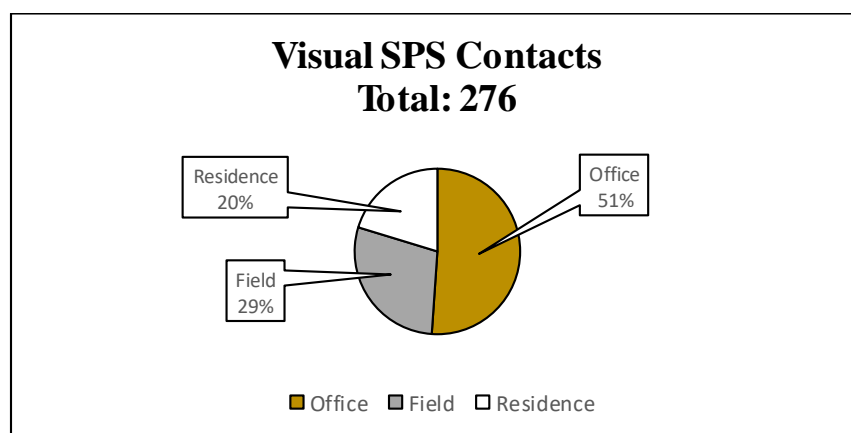
²Information regarding supervision level was obtained from the APETS Supervision History Screen. Total number of probationers may change from month to month based on subsequent changes in supervision level.

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SPS Contacts - Maximum Level Supervision ²			
Requirements Met	July 2019	August 2019	September 2019
Yes	6	8	7
No	6	3	3
N/A ¹	2	3	3
Total	14	14	13
% Compliance	50%	73%	70%
Meets Standard	N	N	N

¹NA includes probationers whose SPS start date was the following month and/or was in jail during the review period.

²Information regarding supervision level was obtained from the APETS Supervision History Screen. Total number of probationers may change from month to month based on subsequent changes in supervision level.



Noteworthy: The Department did an excellent job attaining 100% compliance in minimum supervision level contact requirements.

Department Response: “Med and Max Contact Compliance: Unit supervisors will print the “Management ‘My Caseload’” screen on a monthly basis to review for non-compliance with contact standards. Officers will be required to correct non-compliance within the month. Once corrections are made, reports will be submitted to QCS. At any point where contact compliance is maintained by an officer, this QA procedure will move to quarterly.

New officers will be trained on required contacts within the first 45 days of employment and utilize the New Officer Training Schedule as the QA.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of Client Level Reports in APETS, i.e. Client Contact Compliance, SPS Supervision Levels by Caseload for supervisory case file reviews, and code requirement reminders during staff meetings. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

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Intensive Probation Supervision (IPS) Contacts**

Pursuant to [ACJA § 6-202.01 \(N\) \(3\)\(a\) and \(4\)\(a\), \(5\)\(a\), \(6\)\(a\)](#)

A review of 49 IPS case records was conducted. Of the 49 case records reviewed, on average, 20 probationers were employed at different times during the review period. To determine if supervision requirements were met for a given case, specific contact types; office, field, residence, and employer contacts were taken into consideration as compared to code mandated minimum supervision contact guidelines.

A review of the contacts/case notes screens in APETS during a 12-week period from July 7, 2019 to September 28, 2019 revealed the following:

IPS Contact Summary²												
Requirement Met	Week											
	1	2	3	4	5	6	7	8	9	10	11	12
Yes	23	28	29	27	32	34	33	31	24	24	24	26
No	8	4	4	7	5	3	4	4	10	7	5	4
N/A¹	18	17	16	15	12	12	12	14	15	18	20	19
Total	49	49	49	49	49	49	49	49	49	49	49	49
% Compliance	74%	88%	88%	79%	86%	92%	89%	89%	71%	77%	83%	87%
Average % Compliance	84%											
Meets Standard	N											

¹NA refers to intensive probationers in jail during the review period or recently transitioned to standard supervision.

²Information regarding supervision level was obtained from the APETS Supervision History Screen. Total number of probationers may change from month to month based on subsequent changes in supervision level.

The following represents contacts made with the employers of IPS probationers during the review period:

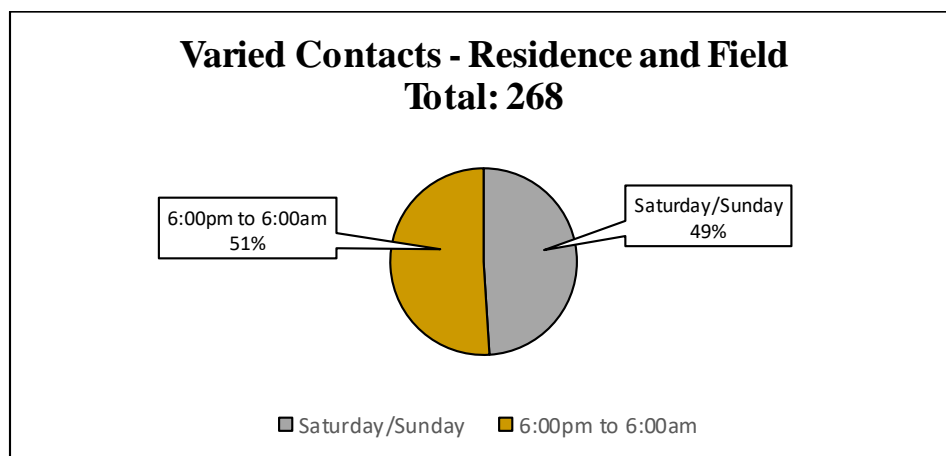
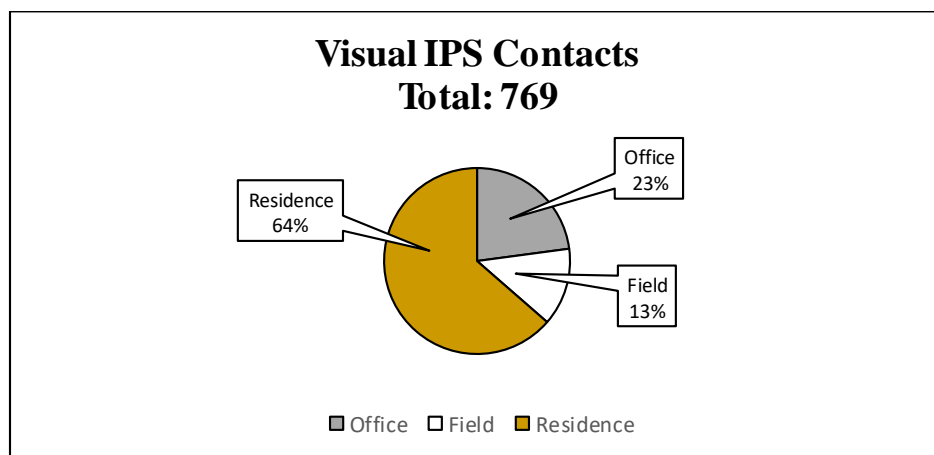
Employer Contact Summary²												
Requirement Met	Week											
	1	2	3	4	5	6	7	8	9	10	11	12
Yes	7	9	10	12	12	12	12	12	10	10	9	9
No	4	4	4	3	4	4	4	4	5	2	2	3
N/A¹	9	7	6	5	4	4	4	4	5	8	9	8
Total	20	20	20	20	20	20	20	20	20	20	20	20
% Compliance	64%	69%	71%	80%	75%	75%	75%	75%	67%	83%	82%	75%
Average % Compliance	74%											
Meets Standard	N											

¹NA refers to intensive probationers in jail, residential treatment, unemployed during the review period, or recently transitioned to standard supervision.

²Information regarding supervision level was obtained from the APETS Supervision History Screen. Total number of probationers may change from month to month based on subsequent changes in supervision level.

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A review of the contacts/case notes screen in APETS revealed that during the three-month review period a total of 769 face to face contacts were made with 49 IPS probationers. The first chart below shows the total contacts made per location (residence, field, and office) and the second chart shows required home and other community contacts on a random and varied basis.



Noteworthy: Not applicable

Department Response: “Unit supervisors will print the “Management ‘My Caseload’” screen on a bi-weekly basis to review for non-compliance with contact standards. Officers will be required to correct non-compliance within the week. Once corrections are made, reports will be submitted to QCS. At any point where contact compliance is maintained by an IPS team, this QA procedure will move to monthly.

New officers will be trained on required contacts within the first 45 days of employment and utilize the New Officer Training Schedule as the QA.”

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Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of Client Level Reports in APETS Application, i.e. Client Contact Compliance, utilization of Periodic Reports in APETS Reports Application, i.e. IPS Supervision Levels by Caseload for supervisory case file reviews, and code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

Sex Offender Contacts

Pursuant to [ACJA §§ 6-201.01\(K\)\(8\)\(a\)](#), [6-201.01\(K\)\(6\)](#) and [6-201.01\(K\)\(4\)\(a, b\)](#)

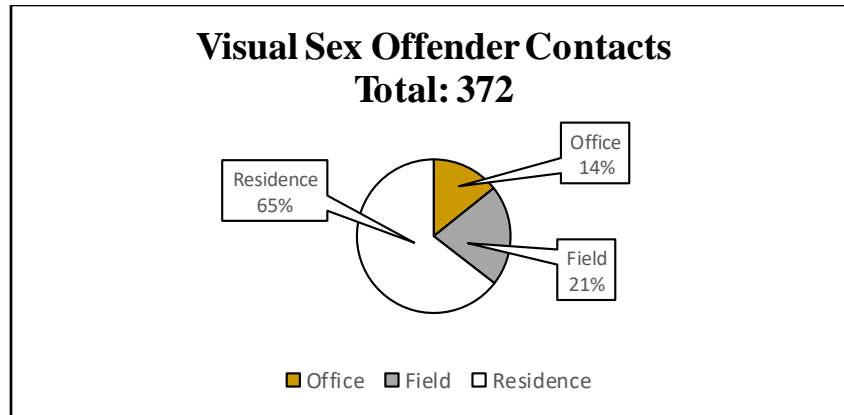
A review of 26 sex offender case records was conducted. The period reviewed for contacts was July 2019, August 2019, and September 2019. Of the 26 case records reviewed, 17 were SPS and nine were IPS.

To determine if supervision contact requirements were in compliance with ACJA, a review of residence, office, and field contacts was conducted. Credit was not given for a collateral contact if the APETS contacts/case notes screen did not contain meaningful dialogue with the person. The review team determined if a case met required contacts based on level of supervision (yes), did not meet required contacts based on level of supervision (no), or that the number and type of contacts was not applicable (N/A). A total of 372 contacts were reviewed and information in APETS revealed the following:

Sex Offender Contacts			
Requirement Met	July 2019	August 2019	September 2019
Yes	20	21	15
No	5	4	5
N/A ¹	1	1	6
Total	26	26	26
% Compliance	80%	84%	75%
Meets Standard	N	N	N

¹N/A includes probationers whose start date was the following month and/or were in jail during the review period.

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Noteworthy: Not applicable

Department Response: “Sex offender supervisor will print the “Management ‘My Caseload’” screen on a monthly basis to review for non-compliance with contact standards. Officers will be required to correct non-compliance within the week (IPS)/month (SPS). Once corrections are made, reports will be submitted to QCS. At any point where contact compliance is maintained by an officer, this QA procedure will move to quarterly.

New officers will be trained on required contacts within the first 45 days of employment and utilize the New Officer Training Schedule as the QA.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of Client Level Reports in APETS, i.e. Client Contact Compliance, SPS Supervision Levels by Caseload for supervisory case file reviews, and code requirement reminders during staff meetings. APETS case notes and other appropriate screens should be utilized to document completion of all code requirements.

Absconder/Warrants

Pursuant to [ACJA § 6-201.01\(J\)\(10\)\(a-g\)](#), [ACJA § 6-105.01\(E\)\(2\)\(g\)\(1\)\(3\)\(4\)\(5\)\(6\)](#), and [A.R.S. § 13-805\(C\)\(1\)\(2\)](#)

Documentation in APETS and case files was reviewed for 30 absconder cases (4 IPS and 26 SPS). At the time of the review, the sample of cases was identified as absconders/warrants. Subsequent to the review, some probationers may have been apprehended but were reviewed as an absconder/warrant case. The findings are listed in the tables below:

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Activity Prior to Warrant						
Requirements	Yes	No	Total	N/A ¹	% Compliance	Meets Standard
SPS PTR filed and warrant requested upon the expiration of 90 days ²	21	5	25	4	81%	<input type="checkbox"/>
IPS PTR filed and warrant requested upon the expiration of 72 hours ³	1	3	4	26	25%	<input type="checkbox"/>
Residence checked	22	2	24	6	92%	<input type="checkbox"/>
Collaterals checked	23	0	23	7	100%	<input type="checkbox"/>
Employer checked	4	0	4	26	100%	<input type="checkbox"/>
Activity After Warrant						
Requirements	Yes	No	Total	N/A ¹	% Compliance	Meets Standard
Criminal history check completed	29	1	30	0	97%	<input type="checkbox"/>
Residence checked	8	11	19	11	42%	<input type="checkbox"/>
Employer checked	2	0	2	28	100%	<input type="checkbox"/>
Opted-in victim notified	5	2	7	23	71%	<input type="checkbox"/>

¹N/A includes probationers being courtesy supervised by another jurisdiction.

²PTR filed and warrant requested upon the expiration of 90 days.

³PTR filed and warrant requested no later than the next business day.

Requirement Met	CRO Filed Upon the Expiration of the 91 st Day
Yes	3
No	26
N/A ¹	1
Total	30
% Compliance	10%
Meets Standard	<input type="checkbox"/>

¹N/A includes probationers apprehended prior to CRO being filed or probationers without outstanding financial terms.

Noteworthy: The Department achieved compliance in five of the 10 review areas.

Department Response: “Standard officer and IPS Team will make at least one attempt to locate the absconder at the last known residence prior to transferring the case to the warrants team.

Casefile Transfer form has been updated to include a checkbox and date for “Last known residence check post-warrant”

*It should be noted that the department has QA procedures in place for this measure, but due to staff shortages this measure was not prioritized.

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CRO filed: Warrants team will continue to maintain log of ABW cases with upcoming CRO dates. Change in procedure will be that the warrants team (and not the prior officer) will complete the CRO should the case reach the 91st day. Warrant Supervisor will review all CROs filed on ABW cases and match them to the log.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the development and utilization of an absconder/warrant case checklist, the use of the Client Tickler screen in APETS to provide 90/60/30-day notifications to run warrant checks; employer checks and filing the CRO. The quality assurance process could also include supervisory case file reviews and code and statute trainings during staff meetings. Furthermore, please review and ensure Department compliance with the new code revisions which became effective January 15, 2020.

Sex Offenders

Pursuant to [A.R.S. §§ 13-3821, 13-3822, 13-3825](#), and [13-610](#)

The relevant codes in effect during the review period, [ACJA § 6-201.01\(K\)](#) and [ACJA § 6-202.01\(N\)](#) and [\(O\)](#), require residence verification timeframes based on supervision level. At the time of the operational review, cases with a supervision start date prior to January 11, 2017 were reviewed per code in effect during that time, which did not require verification within a specific timeframe.

A review of 26 sex offender case records (17 SPS and nine IPS) was conducted. Information in the case file and APETS revealed the following:

Sex Offenders						
Requirements	Yes	No	N/A	Total Cases	% Compliance	Meets Standard
Initial residence verified within 30 days (SPS) or 10 days (IPS)	20	5	1	26	80%	N
Proof of Registration within 10 days	21	1	4 ¹	26	95%	Y
Address/name change notification within 72 hours	17	3	6	26	85%	N
Annual identification	23	3	0	26	88%	N
Treatment referral to a contracted provider	23	0	3	26	100%	Y
DNA sample was secured from the probationer and transmitted to DPS within 30	1	9	16 ²	26	10%	N

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Sex Offenders						
Requirements	Yes	No	N/A	Total Cases	% Compliance	Meets Standard
days of being placed on probation, release from custody or acceptance of incoming ISC						
DNA previously secured by another agency was verified to be in the DPS databank by the PO within 30 days of being placed on probation or acceptance of incoming ISC	14	2	10	26	88%	<input type="checkbox"/>

¹N/A includes initial registrations prior to previous operational review

²N/A includes offenders whose DNA was collected by DOC or a non-probation department

Noteworthy: The Department achieved compliance in two of the seven review areas.

Department Response: “Home Visits – Sex Offender Supervisor will print the “Management ‘What’s Due’” screen monthly for officer corrections to be made by the 15th of each month with reports returned to the sex offender supervisor.

DNA - Officers will be required to collect DNA upon the initial visit to the office by the probationer. This requirement, as well as the DNA statute, will be outlined to staff in all unit meetings no later than September 30, 2020. A monthly **DNA** report from APETS will be run by the APETS Coordinator and provided to each unit supervisor for monthly corrections. Corrections will be made by the 15th of each month with reports returned to QCS upon completion.

Address Name Change – Sex offender officers will create a spreadsheet in the department shared drive with the annual renewal date for each probationer on standard and IPS sex offender caseloads. This will include a section for supervisor sign-off when documentation has been provided of entry into APETS. Supervisor will review this monthly and address missing updates.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure could include the utilization of a sex offender checklist, use of the Client Ticklers screen in APETS which would provide 90/60/30 day notifications for ID renewals, supervisory case file reviews, and statute trainings to ensure mandatory registration requirements are met and understood by officers. APETS case notes and other appropriate screens, i.e. Sex Offender Tracking screen and DNA screen, should be utilized to document completion of all statute requirements.

Global Positioning System (GPS)

Pursuant to [A.R.S. § 13-902\(G\)](#) and [AD 2011-41](#)

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The GPS sample included DCAC w/GPS and GPS w/other cases. A review of two GPS cases was conducted. Information in the case file and APETS revealed the following:

GPS						Meets Standard
Requirements	Yes	No	N/A	Total Cases	% Compliance	
GPS attribute marked in APETS	2	0	0	2	100%	<input checked="" type="checkbox"/>
Probationer activated on initial report w/in 72 hours of sentencing/release from custody	1	0	1 ¹	2	100%	<input checked="" type="checkbox"/>
Probationer activated upon first face to face with probation officer after Court Modification	1	0	1	2	100%	<input checked="" type="checkbox"/>
GPS rules signed by probationer	2	0	0	2	100%	<input checked="" type="checkbox"/>
For documented violations, PO initiates immediate response	0	0	2	2	N/A	<input type="checkbox"/>
Responses entered in APETS within 72 hrs.	0	0	2	2	N/A	<input type="checkbox"/>
If absconder, PTR with 72 hrs.	0	0	2	2	N/A	<input type="checkbox"/>

¹N/A includes probationers that are not designated as DCAC.

Noteworthy: The Department did an outstanding job in achieving standard compliance in all review areas, four of the seven areas met 100 percent compliance.

Department Response: None required

Required Corrective Action: None required

Signed Review/Acknowledgement of Terms and Conditions

Pursuant to [Arizona Rules of Criminal Procedure 27.1](#)

A review of 64 SPS case records and 49 IPS case records was conducted. Information in the case files revealed the following:

Summary of Review and Acknowledgement Forms						Meets Standard
Type of Probation	Yes	No	Total	% Compliance		
SPS	63	1	64	98%		<input checked="" type="checkbox"/>
IPS	48	1	49	98%		<input checked="" type="checkbox"/>

Noteworthy: The Department did a great job in meeting standard compliance in this review area.

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Department Response: None required

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of a New Client checklist to ensure that initial contact with probationers results in minimum code, statute, and AZ Rules of Criminal Procedure requirement compliance.

DNA

Pursuant to [A.R.S. §13-610\(C\)](#), [\(D\)](#), and [\(G through O\)](#)

A review of 64 SPS case records and 49 IPS case records was conducted. Information in the case files and APETS revealed the following:

SPS DNA

SPS DNA Secured/Transmitted/Verified within 30 days	
Yes	0
No	5
N/A ¹	59
Total	64
% Compliance	0%
Meets Standard	N

¹N/A includes misdemeanor dispositions, another agency/county responsible for DNA being secured/transmitted/verified or DNA would have been confirmed in an earlier operational review.

SPS DNA Confirmed	
DNA previously secured/transmitted/verified by a non-probation agency or previous case, did the officer confirm DNA was recorded in the DPS database within 30 days of being placed on probation, release from incarceration, or acceptance of incoming ISC	
Yes	12
No	43
N/A ¹	9
Total	64
% Compliance	22%
Meets Standard	N

¹N/A includes misdemeanors, another agency/county responsible for DNA being secured/transmitted/verified or confirmed in an earlier operational review.

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IPS DNA

IPS DNA Secured/Transmitted/Verified within 30 days	
Yes	1
No	20
N/A ¹	28
Total	49
% Compliance	5%
Meets Standard	<input type="checkbox"/>

¹N/A includes misdemeanor dispositions, another agency/county responsible for DNA being secured/transmitted/verified or DNA would have been confirmed in an earlier operational review.

IPS DNA Confirmed	
DNA previously secured/transmitted/verified by a non-probation agency or previous case, did the officer confirm DNA was recorded in the DPS database within 30 days of being placed on probation, release from incarceration, or acceptance of incoming ISC	
Yes	3
No	18
N/A ¹	28
Total	49
% in Compliance	14%
Meets Standard	<input type="checkbox"/>

¹N/A includes misdemeanors, another agency/county responsible for DNA being secured/transmitted/verified or confirmed in an earlier operational review.

Noteworthy: Not applicable

Department Response: “The department will ensure training for new officers on DNA within 45 days of hire. A reminder will be shared to all officers and surveillance officers by September 30, 2020 through email or unit meetings. Each month, the APETS Coordinator will run the APETS report QA DNA001-Client DNA Verification and be provided to unit Supervisors for review. Non-compliance with DNA collection/recording will be addressed within the month by the officer and reported to the QCS. APETS case notes and other appropriate screens will be utilized to document completion of all statute and code requirements.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure could begin with the utilization of a New Client checklist which includes DNA secured/transmitted/verified, APETS report QA DNA001-Client DNA Verification, supervisory case file reviews, and statute and code requirements discussion during staff meetings. APETS case notes and other appropriate screens should be utilized to document completion of all statute and code requirements. Furthermore, please review

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and ensure department compliance with new code revisions which became effective January 15, 2020.

VICTIMS' RIGHTS

Pursuant to [ACJA § 6-103\(E\)\(4\)](#), [A.R.S. §§ 13-4415 \(A\)\(1-3\)](#) and [13-4415 \(B\)\(1-5\)](#)

A review of 64 SPS case records and 49 IPS case records was conducted. Information in the case files and APETS revealed the following:

SPS Victim Contacts

SPS - Victim Contact			
Requirement Met	Pre-sentence Contact	Victim Opt-In	Notice of Changes Given
Yes	24	11	10
No	0	13	0
N/A	40	40	54
Total	64	64	64
% Compliance	100%	N/A	100%
Meets Standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

IPS Victim Contacts

IPS – Victim Contact			
Requirement Met	Pre-sentence Contact	Victim Opt-In	Notice of Changes Given
Yes	27	7	4
No	0	20	3
N/A	22	22	42
Total	49	49	49
% Compliance	100%	N/A	57%
Meets Standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Noteworthy: The Department did a great job in achieving compliance in three of the review areas.

Department Response: “APETS Coordinator will run the APETS Victim Report on a monthly basis and the QCS review two opt-in victim files per IPS caseload to ensure compliance with ACJA and department policy. Results will be forwarded to the supervisor to address non-compliance issues with the IPS team. Once any non-compliance is corrected, the supervisors will notify the QCS.

New officers will be trained on victim notification within the first 45 days of employment and utilize the New Officer Training Schedule as the QA.”

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Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of a Victim Notification checklist, supervisory case file reviews, Code and Statute training, along with running the APETS Victim Report in external reports. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

OFFENDER ACCOUNTABILITY

The enforcement of court-ordered financial obligations such as restitution and probation service fees (PSF) and community restitution orders (CRO) are integral parts of probation supervision, the absence of which undermines probationer accountability and mitigates the sentence imposed. During the operational review, intensive and standard probation case files were reviewed to assess the Department's enforcement of financial obligations and CROs.

SPS Financials

Pursuant to [ACJA § 6-103\(E\)\(4\)\(I\)](#), and [A.R.S. § 13-901](#)

A review of 64 case records was conducted. Information in the case file/financial file/APETS and information from the Department revealed the following:

Standard Probation Service Fees (PSF)	
Requirement Met	Delinquency Addressed
Yes	23
No	28
N/A ¹	13
Total	64
% in Compliance	45%
Meets Standard	N

¹N/A includes probationers with current financials or under courtesy supervision.

The following table is for informational purposes only:

Standard Probation Service Fees (PSF)	
Requirement Met	PSF Current
Yes	6
No	51
N/A ¹	7
Total	64
% Compliance	N/A
Meets Standard	NA

¹N/A includes probationers under courtesy supervision.

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A review of 64 case records was conducted. Restitution was ordered in seven of the 64 cases. Information in the case file/financial file/APETS and information from the Department revealed the following:

Standard Probation Restitution				
Requirement Met	Restitution Current	Court Notified	State Notified	Opted in Victim Notified
Yes	5	1	1	0
No	2	1	1	0
N/A ¹	57	62	62	64
Total	64	64	64	64
% Compliance	N/A	50%	50%	N/A
Meets Standard	NA	N	N	NA

¹N/A includes cases without court ordered restitution.

Noteworthy: Not applicable

Department Response: “For collections of fees, fines and assessments, the unit supervisor will select a random sample of 25% of the caseload each quarter and instruct the officer to review AJACS on these selected cases. Any probationers who have failed to make a payment in the prior two months will be contacted by the officer to discuss and address the delinquencies. This contact will be documented in APETS. All corrections/documentation will be completed by the end of the month.

Victim Restitution Notification: Upon review of the new hire training it was determined that the section of Policy 3.41 subsection E 7a and 7b was not reviewed as part of the court and victim notification. The new hire officer training now includes a separate section for training for Policy 3.41 section E 7a and 7b. (See attached New Officer Training form) This training will include training on court notification and victim if notification has been requested once a client is delinquent more than two full months of court ordered monthly restitution. The training will include examples of Notice of Delinquent Restitution merge document located in the P-Drive Supervision folder.

For existing officers, a refresher of this policy shall be covered within unit meetings no later than September 30, 2020.

Training day: The department has instituted a designated training day the second Thursday of each month which will also be utilized for these types of refreshers.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include scheduled refresher trainings and regular supervisory case file reviews to ensure efforts are being made by officers to enforce financial orders. APETS case notes should be utilized to document completion of all code and statute requirements, i.e. monitoring and addressing arrearage of both PSF and restitution payments.

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IPS Financials

Pursuant to [ACJA § 6-103\(E\)\(4\)\(i\)](#) and [A.R.S. § 13-901](#)

A review of 49 case records was conducted. Information in the case file/financial file/APETS and information from the Department revealed the following:

Intensive Probation Service Fees (PSF)	
Requirement Met	Delinquency Addressed
Yes	37
No	9
N/A ¹	3
Total	49
% in Compliance	80%
Meets Standard	N

¹N/A includes probationers with current financials or under courtesy supervision.

The following table is for informational purposes only:

Intensive Probation Service Fees (PSF)	
Requirement Met	PSF Current
Yes	1
No	46
N/A ¹	2
Total	49
% in Compliance	N/A
Meets Standard	NA

¹N/A includes probationers under courtesy supervision.

Restitution was ordered in seven of the 49 cases. Information in the case file/financial file/APETS and information from the Department revealed the following:

Intensive Probation Restitution				
Requirement Met	Restitution Current	Court Notified	State Notified	Opted in Victim Notified
Yes	1	6	6	1
No	6	0	0	1
N/A ¹	42	43	43	47
Total	49	49	49	49
% Compliance	N/A	100%	100%	50%
Meets Standard	NA	Y	Y	N

¹N/A includes cases without court ordered restitution.

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Noteworthy: The Department does a great job with notifying the court and the state of restitution payment delinquencies which represents two of the six review areas.

Department Response: “For collections of fees, fines and assessments, unit supervisors will select a random sample of 25% of each IPS team’s caseload each quarter and instruct the officer to review AJACS on these selected cases. Any probationers who have failed to make a payment in the prior two months will be contacted by the officer, or referred to the department’s financial unit, to discuss and address the delinquencies. All corrections/documentation will be completed by the end of the month.

Victim Restitution Notification - Upon review of the new hire training it was determined that the section of Policy 3.41 subsection E 7a and 7b was not reviewed as part of the court and victim notification. The new hire officer training now includes a separate section for training for Policy 3.41 section E 7a and 7b. (See attached New Officer Training form) This training will include training on court notification and victim if notification has been requested once a client is delinquent more than two full months of court ordered monthly restitution. The training will include examples of Notice of Delinquent Restitution merge document located in the P-Drive Supervision folder.

For existing officers, a refresher of this policy shall be covered within unit meetings no later than September 30, 2020.

Training day: The department has instituted a designated training day the second Thursday of each month which will also be utilized for these types of refreshers.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include refresher trainings and regular supervisory case file reviews to ensure efforts are being made by officers to enforce financial orders. APETS case notes should be utilized to document completion of all code and statute requirements, i.e. monitoring and addressing any arrearage in both PSF and restitution payments.

SPS Community Restitution (CR) Hours

Pursuant to [ACJA §§ 6-201.01\(J\)\(1\)\(g\)](#), and [\(K\)\(5\)\(d\)](#)

A review of 64 case records was conducted. Illustrated below is the monthly breakdown of probationers’ compliance with CR hours for the review period.

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Monthly Community Restitution Requirement¹				
CR Hours Completed	July 2019	August 2019	September 2019	Delinquency Addressed
Yes	0	0	0	0
No	1	1	1	1
N/A ²	63	63	63	63
Total	64	64	64	64
% Compliance	0%	0%	0%	0%
Meets Standard	NA	NA	NA	N

¹Mandatory per A.R.S. §§13-3405, 3406, 3407, and 3408.

²CR hours were not ordered, discretionary, or completed prior to the review period.

Noteworthy: Not applicable

Department Response: “On a monthly basis (by the 5th of the month), the APETS Coordinator will provide the CREST001-Agency Assignment and Hours report to the Community Restitution Supervisor. C/R team will then review and identify the names of those who did not submit hours for the month in question. C/R Team will contact and address community restitution delinquency.

Case note will then be entered in APETS to document the conversation or attempt.

Follow-up 30-60 days.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include utilization of the APETS Report Application CWS (Community Restitution) Report, supervisory case file reviews, and code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements. Officers should seek clarification from the Court when offenses that require mandatory CR hours are not ordered.

IPS Community Restitution (CR) Hours

Pursuant to [A.R.S. § 13-914\(E\)\(6\)](#) and [ACJA § 6-202.01\(D\)\(6\)](#)

A review of 49 case records was conducted. The review period consisted of a three-month time period as illustrated below:

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Monthly Community Restitution Requirement				
Hours Completed	July 2019	August 2019	September 2019	Delinquency Addressed
Yes	2	1	1	17
No	15	14	16	5
N/A ¹	32	34	32	27
Total	49	49	49	49
% Compliance	12%	7%	6%	77%
Meets Standard	NA	NA	NA	N

¹N/A includes probationers who were in prison, jail, treatment, hospital, missing, or CR hours were waived

Noteworthy: Not applicable

Department Response: “On a monthly basis (by the 5th of the month), the APETS Coordinator will provide the CREST001-Agency Assignment and Hours report to the Community Restitution Supervisor. C/R team will then review and identify the names of those who did not submit hours for the month in question. C/R Team will contact and address community restitution delinquency.

Case note will then be entered in APETS to document the conversation or attempt.

Follow-up 30-60 days.

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include utilization of the APETS Report Application CWS (Community Restitution) Report, supervisory case file reviews, and code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements. Officers should seek clarification from the Court when offenses that require mandatory CR hours are not ordered.

CASE MANAGEMENT

SPS Residence and Employment Verification

Based on supervision level at the time of sentencing or release from custody, the following table represents the number of residence and employment verifications conducted for the 64 case records reviewed:

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Residence & Employment Verification			
	Residence Verification w/in 30 Days (High and Medium Risk)	Residence Verification w/in 60 Days (Low Risk)	Employment Verification
Yes	19	2	29
No	29	2	0
N/A	16 ¹	60 ²	35 ³
Total	64	64	64
% Compliance	40%	50%	100%
Meets Standard	N	N	Y

¹N/A includes probationers who were initially on IPS or low risk.

²N/A includes probationers who were initially high or medium risk.

³N/A includes probationers who are not employed.

Noteworthy: The Department met standard compliance in one of the three review areas above.

Department Response: “What’s due report will be run by the unit supervisors at the first of each month for review of residence verification and FROST deadlines. Unit supervisors will address any deficiencies with staff and return reports to QCS by the end of each month with corrections made. Attempts of verification will be documented in APETS. Data entry will assist in verification of clients who are in custody upon entering warrants service in APETS. The code requirement has been incorporated in new hire review orientation documentation. A new case checklist will be placed in file with date verification and each officer will review and sign code requirement attachment within the next 30 days. Code requirements will be reviewed with staff in unit meetings by September 30, 2020.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of the New Client checklist and Client Ticklers screen in APETS, which would provide notification reminders to complete required tasks. Additional resources could include the APETS QA Reports, supervisory case file reviews, code and statute reminders during staff meetings. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

SPS OST/FROST

Pursuant to [ACJA §§ 6-201.01\(J\)\(5\)\(a\)\(1\)](#) and [6-105.01\(E\)\(2\)\(b\)\(1\)\(g\)](#)

At the time of this operational review, cases sentenced prior to January 11, 2017 were reviewed per code that was in effect which required a reassessment every 180 days. Probationers sentenced on or after January 11, 2017 were reviewed per current code which requires a reassessment 12 months after the initial assessment.

The results for the 64 SPS case records reviewed are listed in the table below:

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Offender Screening Tool (OST) Completed within 30 days	
Yes	48
No	5
N/A ¹	11
Total	64
% Compliance	91%
Meets Standard	<input checked="" type="checkbox"/>

¹N/A includes cases with the initial assessment completed by another Department.

The results for 66 reassessments reviewed are listed in the table below:

Reassessment (FROST)¹ per Code prior to 1/11/17 or Code requirement on or after 1/11/17	
Yes	26
No	40
Total	66
% Compliance	39%
Meets Standard	<input type="checkbox"/>

¹The required FROSTs for the past three years were reviewed.

Noteworthy: The Department does well in meeting standard compliance in the OST review area.

Department Response: “What’s due report will be run by the unit supervisors at the first of each month for review of residence verification and FROST deadlines. Unit supervisors will address any deficiencies with staff and return reports to QCS by the end of each month with corrections made. Attempts of verification will be documented in APETS. Data entry will assist in verification of clients who are in custody upon entering warrants service in APETS. The code requirement has been incorporated in new hire review orientation documentation. A new case checklist will be placed in file with date verification and each officer will review and sign code requirement attachment within the next 30 days. Code requirements will be reviewed with staff in unit meetings by September 30, 2020.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of the APETS Client Ticklers screen to provide 90/60/30-day notification reminders to complete reassessments; the APETS QA Reports, supervisory case file reviews, and code and statute discussions during staff meetings could also be implemented. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

SPS Assessment Score Matching Supervision Level

Pursuant to [ACJA § 6-105.01\(E\)\(2\)\(b\)\(1\)\(c\)](#)

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The post-sentence supervision assignment sheet, updated in January 2010, requires that assessment scores of 0-5 (males) and 0-8 (females) be supervised under standard, minimum supervision requirements. Assessment scores of 6-17 (males), 9-20 (females) will be supervised under the standard, medium supervision requirements, and assessment scores of 18 and higher (males) and 21 and higher (females) will be supervised under the standard, maximum supervision requirements.

Each of the 64 SPS cases were compared to the above standards using the current supervision level and the most current OST or FROST. The results are outlined below:

Supervision Level Matches Assessment Scores for Standard Supervision			
Requirement Met	Maximum	Medium	Minimum
Yes	14	42	7
No	0	1	0
Total	14	43	7
N/A ¹	50	21	57
% in Compliance	100%	98%	100%
Meets Standard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

¹Most recent risk score was not in the case file and/or APETS

Noteworthy: The Department did an excellent job meeting compliance in this review area.

Department Response: None required

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of APETS Report Application County Population by Risk Report, supervisory case file reviews, and code and statute trainings. APETS case notes and other appropriate screens should be utilized to document overrides and completion of all code and statute requirements.

SPS Case Plan

Pursuant to [ACJA §§ 6-201.01\(J\)\(5\)\(a\)\(4\)](#), [6-201.01\(J\)\(5\)\(a\)\(7-8\)](#), and [6-201.01\(J\)\(1\)\(I\)](#)

At the time of this operational review, cases sentenced prior to January 11, 2017 were reviewed per code that was in effect which required a follow-up case plan every 180 days. Probationers sentenced on or after January 11, 2017 were reviewed per current code, which requires a follow-up case plan 12 months after the initial case plan is completed.

The table below represents the Department's compliance with completing initial case plans and a review of 46 follow-up case plans. Of the 64 cases reviewed, two were minimum level supervision cases.

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SPS Case Plans ¹						Meets Standard
Requirements	Yes	No	N/A ²	Total	% Compliance	
Initial completed within 60 days	26	24	14	64	52%	<input type="checkbox"/>
Follow-up ³ completed per Code prior to January 11, 2017 or per current Code as of January 11, 2017	16	30	0	46	35%	<input type="checkbox"/>
If minimum supervision level, was a case plan completed as required	0	2	44	46	0%	<input type="checkbox"/>

¹CP's from the last operational review

²N/A includes cases where another department was responsible for initial CP and/or follow-up.

³Follow-up CP completed as required per individual case.

Noteworthy: Not applicable

Department Response: “The “*Management ‘Whats[sic] Due’*” report from APETS will be run by the unit Supervisors each month for corrections. Corrections will be made by the end of each month with reports returned to Quality Control Supervisor upon completion. Additionally, we have made a request that probation supervisors and support staff personnel be provided the availability to create ticklers as needed. An[sic] new case checklist will be placed in the file to document the completion of the initial case plan within 60 days of sentencing or release from custody. Policy 3.01 has been updated and staff have been advised and signed an acknowledgment of understanding for the new policy.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of the APETS Client Ticklers screen to provide 90/60/30-day notification reminders to complete case plans; supervisory case file reviews; code and statute training discussions during staff meetings could also be implemented. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

SPS Case Plan Signatures

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(a\)\(4\)](#)

The probationer's and supervising officer's signatures on the case plan indicate both participated in and are aware of the goals to be addressed during each contact. Results for the 64 SPS case files reviewed are displayed below:

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Most Recent Case Plan	
Yes	39
No	2
N/A ¹	23
Total	64
% Compliance	95%
Meets Standard	<input checked="" type="checkbox"/>

¹N/A includes low risk not needing a CP and cases not containing a current CP.

Noteworthy: The Department did a great job in achieving 95 percent compliance in this review area.

Department response: None required

Required Corrective Action: None required

Recommendation: The QA procedure may include supervisory case file reviews, code, statute, and policy trainings, and reminders during staff meetings of the importance of required signatures.

SPS Low Risk Annual Review

Pursuant to [AJCA 6-201.01\(J\)\(5\)](#)

The table below shows the Department's compliance regarding case file reviews for probationers that have been assessed as low risk. Of the 64 cases reviewed, 7 were minimum level supervision cases.

Low Risk Supervision Level - Annual Review	
Yes	6
No	0
N/A ¹	58
Total	62
% Compliance	100%
Meets Standard	<input checked="" type="checkbox"/>

¹NA includes low risk not meeting the annual time period requirement.

Noteworthy: The Department did an excellent job accomplishing 100 percent compliance in this review area.

Department response: None required

Required Corrective Action: None required

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IPS

Photo in File

Pursuant to [ACJA § 6-202.01\(P\)\(2\)\(c\)](#)

Verification of Employment

Pursuant to [ACJA § 6-202.01\(N\)\(3\)\(b\)](#), [\(4\)\(b\)](#), [\(5\)\(b\)](#), and [\(6\)\(b\)](#)

Verification of Job Search and Verification of Community Restitution

Pursuant to [A.R.S. § 13-914\(E\)\(1 and 6\)](#) and [ACJA § 6-202.01 \(L\)\(2\)\(i\)](#)

Verification of Residence

Pursuant to [ACJA § 6-202.01\(N\)\(3\)\(b\)](#)

A review of 49 case records revealed the following:

Intensive Probation Cases					
Requirement Met	Photo in File	Employment		Residence	
		Verified w/in 10 Days	Job Search Verification	CR Verification	Verified w/in 10 Days
Yes	49	22	3	17	37
No	0	2	13	5	3
N/A	0	25 ¹	33 ²	27	9 ³
Total	49	49	49	49	49
% Compliance	100%	92%	19%	77%	93%
Meets Standard	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

¹N/A includes job search or disabled probationers.

²N/A includes employed, full-time student, or in treatment.

³N/A includes reinstatements to IPS or sentenced prior to 3/11/2017.

Noteworthy: The Department did a good job in meeting minimum compliance in three of the five review areas.

Department Response:

Job Search: “Unit supervisors will run the hand count report each month to determine those probationers who are unemployed. Unit supervisors will sample 25% of those cases each month and review for Job Search compliance per policy.

CR Verification: On a monthly basis (*[sic]* the APETS Coordinator will provide the CREST001-Agency Assignment and Hours report to the Community Restitution Supervisor. C/R team will then review and identify the names of those who did not submit hours for the month in question. C/R Team will contact and address community restitution delinquency. Case note will then be

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entered in APETS to document the conversation or attempt. C/R team will notify unit supervisors monthly of cases with community restitution delinquencies.

Follow-up 30-60 days.

Unit supervisors will sample 10% of the caseload each month to review for community restitution verification in the files.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include development and utilization of an IPS checklist, the use of APETS QA Reports, supervisory case file reviews, and code and statute trainings. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

Verification of IPS Schedules

Pursuant to [A.R.S. § 13-914\(E\)\(4\)](#)

A review of 49 case records revealed the following:

IPS Schedules Submitted and Approved	
Yes	45
No	3
N/A ¹	1
Total	49
% Compliance	94%
Meets Standard	<input checked="" type="checkbox"/>

¹N/A refers to intensive probationers in jail, ADC, residential treatment, or recently transitioned to SPS.

Noteworthy: The Department achieved compliance in this review area.

Department Response: None required

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include development and utilization of an IPS checklist, supervisory case file reviews, and code training. APETS case notes and other appropriate screens should be utilized to document completion of all code requirements.

IPS OST/FROST and Case Plan

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Pursuant to [ACJA §§ 6-105.01\(E\)\(2\)\(b\)\(1\)\(a\), 6-105.01\(E\)\(2\)\(b\)\(1\)\(g\), 6-202.01\(L\)\(2\)\(c\), 6-202.01\(L\)\(2\)\(h\), and 6-202.01\(L\)\(2\)\(c\)](#)

Per the January 11, 2017 code revision, initial assessments and reassessments completed on or after this date were reviewed using the 30 day/12-month requirements. Initial assessments and reassessments completed prior to January 11, 2017, were reviewed according to the 30 day/180-day requirements.

The table below represents the Department's compliance with completing initial assessments (OST) during the required timeframe and its compliance with completing 36 follow-up/annual assessments (FROST) during the required timeframe.

A review of 49 case records revealed the following:

Requirement Met	Initial Assessment (OST) w/in 30 days or at PSI	Reassessment (FROST)¹ Required During the Review Period
Yes	33	17
No	0	19
N/A ²	16	0
Total	49	36
% Compliance	100%	47%
Meets Standard	<input checked="" type="checkbox"/>	<input type="checkbox"/>

¹The required FROSTs for the past four years were reviewed.

²N/A includes offenders reinstated to IPS or OST completed by another agency/Department.

The table below represents the Department's compliance with completing the initial case plans and a review of 18 follow-up case plans.

IPS Case Plans¹						Meets Standard
Requirements	Yes	No	N/A²	Total	% Compliance	
Initial completed within 30 days	5	34	10	49	13%	<input type="checkbox"/>
Required Follow-up/Annual completed	6	12	0	18	33%	<input type="checkbox"/>
Required signatures on most recent case plan	32	8	9	49	80%	<input type="checkbox"/>

¹The case plans for the past three years were reviewed.

²Another agency/county responsible for initial case plan, and/or follow-up case plan, case plan not necessary for the applicable case and/or case plan not necessary at the time of the operational review or would have been verified in an earlier operational review.

Noteworthy: Not applicable

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Department Response: “Unit supervisors will print the “Management ‘What’s Due’” screen monthly for officer corrections to be made by the 15th of each month with reports returned to the QCS.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of the Client Ticklers screen in APETS which would assist in providing 90/60/30-day notifications to complete case plans; supervisory case file reviews, and code and statute trainings. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

Interstate Incoming

Pursuant to [ACJA § 6-204.01\(J\)](#) and [\(L\)\(1\)\(2\)](#), [ACJA § 6-201.01, 6-202.01](#), [A.R.S § 31-467.06](#), and [Interstate Commission for Adult Offender Supervision \(ICAOS\) Rules](#)

ISC Incoming						Meets Standard
Requirements	Yes	No	N/A	Total	% Compliance	
Arizona terms & conditions signed and, in the file	30	0	0	30	100%	<input checked="" type="checkbox"/>
VCAF specified on Arizona terms & conditions	30	0	0	30	100%	<input checked="" type="checkbox"/>
Sending state’s terms & conditions in the file	29	1	0	30	97%	<input checked="" type="checkbox"/>
Interstate tracking screen completed in APETS	30	0	0	30	100%	<input checked="" type="checkbox"/>
ISC status accurate in APETS (accepted, closed, etc.)	27	3	0	30	90%	<input checked="" type="checkbox"/>
Delinquent VCAF collections addressed by PO	5	8	17	30	38%	<input type="checkbox"/>
OST completion within 30 days of arrival or acceptance	23	7	0	30	77%	<input type="checkbox"/>
Initial case plan completion within timeframe	7	20	3	30	26%	<input type="checkbox"/>
DNA sample was secured from the probationer, transmitted to DPS, and verified to be in the DPS databank by the PO within 30 days of acceptance or arrival	0	19	11	30	0%	<input type="checkbox"/>

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DNA previously secured by another agency was verified to be in the DPS databank by the PO within 30 days of acceptance or arrival	2	5	23	30	29%	N
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For informational purposes only in relation to VCAF monies owed to Arizona:

ISC Incoming Monies Owed	Yes	No	N/A	Total	% Compliance
VCAF payments current	8	13	9	30	38%

Noteworthy: The Department does well to ensure the APETS interstate tracking screen is complete. These entries are critical for interstate compact statistics. Officers are doing well with securing probationers' signatures on the Arizona terms and conditions and in maintaining the sending state's terms and conditions in the file.

Department Response: "Delinquent VCAF – For collections of VCAF, the APETS Coordinator will run the incoming ISC case report from APETS bi-annually. ISC supervisor will supply the field supervisors with a list of all incoming ISC cases every six months. The field supervisors will include all incoming ISC cases in their random selection of 25% of the caseload and instruct the officer to review AJACS on all selected cases. Any probationers who have failed to make a payment in the prior two months will be contacted by the officer to discuss and address the delinquencies. This contact will be documented in APETS.

OST – ISC Officers will complete the OST upon the initial office visit following the ISC probationer's arrival. Probation transfer checklist will be initiated requiring supervisor approval to transfer file to field officer ensuring that the OST is complete.

Case Plan - The "**Management 'What's Due'**" report from APETS will be run by the unit Supervisors each month for corrections. Corrections will be made by the end of each month with reports returned to Quality Control Supervisor upon completion. Additionally, we have made a request that probation supervisors and support staff personnel be provided the availability to create ticklers as needed. An updated case checklist will be placed in the file to document the completion of the initial case plan within 60 days of sentencing or release from custody. Policy 3.01 has been updated and staff have been advised and signed an acknowledgment of understanding for the new policy.

DNA Collection and Confirmation – The department will ensure training for new officers on DNA within 45 days of hire. A reminder will be shared to all officers and surveillance officers by September 30, 2020 through email or unit meetings.

Each month, the APETS Coordinator will run the APETS report QA DNA001-Client DNA Verification and be provided to unit Supervisors for review. Non-compliance with DNA collection/recording will be addressed within the month by the officer and reported to the QCS.

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APETS case notes and other appropriate screens will be utilized to document completion of all statute and code requirements.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure could include a checklist for incoming interstate compact probationers to ensure the OST and initial case plan is completed as defined by code. The checklist should also include requirements for DNA collection and verification. The QA DNA001-Client DNA Verification APETS report could assist in regular monitoring of this requirement. APETS case notes, the DNA screen, and the case file should be utilized to document completion of all code and statute requirements.

Interstate Outgoing

Pursuant to [ACJA § 6-204.01\(J\) and \(L\)\(1\)\(2\)](#), [ACJA § 6-201.01](#), [A.R.S § 31-467](#), and [Interstate Commission for Adult Offender Supervision \(ICAOS\) Rules](#)

ISC Outgoing						
Requirements	Yes	No	N/A	Total Cases	% Compliance	Meets Standard
ISC status is accurate (accepted, closed, etc.), ICOTS & APETS match	30	0	0	30	100%	Y
Probationer left with valid reporting instructions	30	0	0	30	100%	Y
PO responses to violation reports within 10 business days	0	0	30	30	N/A	NA
DNA sample was secured from the probationer, transmitted to DPS, and verified to be in the DPS databank by the PO within 30 days of being placed on probation or release from custody	6	22	2	30	21%	N
DNA previously secured by another agency was verified to be in the DPS databank by the PO within 30 days of being placed on probation	0	1	29	30	0%	N
The Opted-in Victim was notified of ISC and any other probation status issues	4	1	25	30	80%	Y

Noteworthy: The Department achieved 100% compliance in two out of six review areas; one

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compliance area was not applicable.

Department Response: “DNA Collection and Confirmation – The department will ensure training for new officers on DNA within 45 days of hire. A reminder will be shared to all officers and surveillance officers by September 30, 2020 through email or unit meetings.

Each month, the APETS Coordinator will run the APETS report QA DNA001-Client DNA Verification and be provided to unit Supervisors for review. Non-compliance with DNA collection/recording will be addressed within the month by the officer and reported to the QCS.

APETS case notes and other appropriate screens will be utilized to document completion of all statute and code requirements.”

Required Corrective Action: None required

Recommendation: The quality assurance process could include a checklist for outgoing interstate compact probationers to ensure DNA is verified. The QA DNA001-Client DNA Verification APETS report could also assist in regularly monitoring this requirement. APETS case notes, the DNA screen, and the case file should be utilized to document completion of all code and statute requirements.

If an offender is in arrears, please complete the following:

- Check ICOTS for address and employment information and attempt to contact the probationer
- Follow local policies and procedures to notify the probationer of court-ordered financial obligations, send payment balances and monthly amounts due with instructions on submission of payments
- In compliance with ACJA, submit notification to the court, state, and opted-in victim for probationers 60 days or more in arrears for restitution payments
- Submit a Compact Action Request via ICOTS to the receiving state to request assistance pursuant to ICAOS rules
- If attempts to collect monies have failed, notify the court and state to determine the need for a status or revocation hearing and consider a discretionary retaking

Closed

Pursuant to [A.R.S. §§ 12-253 \(2\) and \(7\), 13-4415 \(A\)\(1-3\), 13-4415 \(B\)\(1-5\), 13-610\(C\),\(D\) and \(G through O\), 13-902\(C\), 13-805\(A\)\(1\)\(2\), and ACJA § 6-201.01\(J\)\(5\)\(a\)\(12\)](#)

The table below lists the results of 30 closed cases that were reviewed:

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Closed Cases						
Requirements	Yes	No	N/A¹	Total	% Compliance	Meets Standard
Warrant Check Before Termination	24	0	6	30	100%	<input checked="" type="checkbox"/>
Court Ordered Treatment Completed	20	1	9	30	95%	<input type="checkbox"/>
Order of Discharge in file	24	0	6	30	100%	<input checked="" type="checkbox"/>
Restitution Owed at Closure	0	0	30	30	N/A	<input type="checkbox"/>
Extended for Restitution	0	0	30	30	N/A	<input type="checkbox"/>
Other financial terms owed at closure	14	16	0	30	47%	<input type="checkbox"/>
CRO Entered for Outstanding Financial Balances	11	3	16	30	77%	<input type="checkbox"/>
Opted-In Victim Notified of Closure	5	0	25	30	100%	<input checked="" type="checkbox"/>
CR hours required by Statute completed by Closure	2	3	25	30	40%	<input type="checkbox"/>
DNA secured, transmitted, and verified within 30 days	0	24	6	30	0%	<input type="checkbox"/>
If DNA was previously secured by another agency did the officer, verify DNA was in the DPS databank within 30 days	1	3	26	30	25%	<input type="checkbox"/>

¹N/A includes cases that were revoked, Judicial Term, Co-terminus, deceased, or misdemeanor.

Noteworthy: The Department achieved compliance in three of the eleven review areas; five review areas were not applicable.

Department Response: “Regarding the DNA collection and certification as it relates to closed cases, this should be resolved through our efforts listed in the SPS/IPS DNA response.

DNA Collection and Confirmation SPS/IPS: The department will ensure training for new officers on DNA within 45 days of hire. A reminder will be shared to all officers and surveillance officers by September 30, 2020 through email or unit meetings.

Each month, the APETS Coordinator will run the APETS report QA DNA001-Client DNA Verification and be provided to unit Supervisors for review. Non-compliance with DNA collection/recording will be addressed within the month by the officer and reported to the QCS.

APETS case notes and other appropriate screens will be utilized to document completion of all statute and code requirements.

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Regarding the Criminal Restitution Order for closed cases, our research indicates that this is a result of cases which have been revoked to prison and the current verbiage included in our probation violation report recommendation does not request that a CRO be ordered, but rather that the court order the probationer to pay the outstanding balances. To correct this, the verbiage will be modified from

It is recommended that the defendant's probation be revoked and that he be sentenced to the Arizona Department of Corrections for the term of with credit for days served. Further, that the defendant shall serve a term of community supervision consecutive to the term of imprisonment pursuant to ARS §§ 13-603(1) and 13-603(J). Also, that the defendant be ordered to pay the outstanding balances of \$ in accrued probation fees and \$ in attorney fees, plus a \$ Superior Court enhancement fee and an additional \$ attorney fee for the current proceedings.

TO

It is recommended that the defendant's probation be revoked and that he be sentenced to the Arizona Department of Corrections for the term of with credit for days served. Further, that the defendant shall serve a term of community supervision consecutive to the term of imprisonment pursuant to ARS §§ 13-603(1) and 13-603(J). Also, it is recommended that the court enter a criminal restitution order in favor of the state for the unpaid balances of \$ in accrued probation fees and \$ in attorney fees, plus a \$ Superior Court enhancement fee and an additional \$ attorney fee for the current proceedings. Additionally, it is recommended that the court enter a criminal restitution order in favor of victim _____ for the unpaid balance of \$ in court ordered restitution, including interest that shall accrue at the rate of 10% each year per A.R.S. 13-805(E); and in favor of victim _____ for the unpaid balance of \$ in court ordered restitution, including interest that shall accrue at the rate of 10% each year per A.R.S. 13-805(E); and in favor of victim _____ for the unpaid balance of \$ in court ordered restitution, including interest that shall accrue at the rate of 10% each year per A.R.S. 13-805(E); (etc. as needed)"

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the development and utilization of a Closed Case checklist, the use of the Client Ticklers screen in APETS, to provide 90/60/30-day reminder notifications to officers to complete warrant checks, supervisory case file reviews, and code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

TREATMENT SERVICES

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SPS Treatment Referrals

Pursuant to [ACJA § 6-201.01\(J\)\(5\)\(b\)](#)

A review of 64 case records was conducted. Information in the case file and APETS revealed the following:

SPS Treatment Referral	
Requirement Met	Referral w/in 60 days
Yes	48
No	4
N/A	12
Total	64
% Compliance	92%
Meets Standard	<input checked="" type="checkbox"/>

Noteworthy: The Department did a great job in meeting compliance in this review area.

Department response: None required

Required Corrective Action: None required

Recommendation: Continue to ensure that initial contact with probationers results in minimum code and statute requirement compliance. Adherence to APETS 90/60/30-day notifications will also assist in continued compliance. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

IPS Treatment Referrals

Pursuant to [ACJA § 6-202.01\(L\)\(2\)\(o\)](#)

A review of 49 case records was conducted. Information in the case file and APETS revealed the following:

IPS Treatment Referral	
Requirement Met	Referral w/in 60 days prior to January 11, 2017 or w/in 30 days effective January 11, 2017
Yes	31
No	3
N/A	15
Total	49
% Compliance	91%
Meets Standard	<input checked="" type="checkbox"/>

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Noteworthy: The Department did a good job achieving compliance in this review area.

Department response: None required

Required Corrective Action: None required

Recommendation: Continue to ensure that initial contact with probationers meets minimum code and statute requirement compliance. Adherence to APETS 90/60/30-day notifications will also assist in continued compliance. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

Transferred Youth

A transferred youth (TY) is a juvenile who is fifteen, sixteen or seventeen years of age at the time the alleged offense is committed and was:

- a. Transferred to the adult court via a transfer hearing or;
- b. Charged in the adult court (direct filed) while still a juvenile.

Statutes relating to TY are: [A.R.S. §§ 8-322, 8-327, 13-501, 13-504, 13-921, 13-923, 13-3821, 13-3822, 8-302](#), and [13-350.01](#)

ACJA Codes relating to transferred youth on probation: [ACJA §§ 6-201.01, 6-202.01](#) and [6-105.01](#)

A review of 17 case records was conducted. Information in the case file and APETS revealed the following:

Transferred Youth						
Requirements	Yes	No	N/A	Total	% Compliance	Meets Standard
OST within 30 days	15	2	0	17	88%	<input type="checkbox"/>
FROST within 12 months	4	4	9	17	50%	<input type="checkbox"/>
Initial case plan within 60 days of sentencing/release from custody/acceptance	11	6	0	17	65%	<input type="checkbox"/>
Risk score agree with supervision level	16	1	0	17	94%	<input type="checkbox"/>
Screened for Title 19 or 21 (AHCCCS)	12	2	3	17	86%	<input type="checkbox"/>

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For informational purposes only:

Summary	Yes	No	N/A	Total
Probationer has GED/high school diploma	6	11	0	17
Enrolled in school	6	5	6	17
Enrolled in GED classes	2	3	12	17
Employed	5	12	0	17
Was treatment court ordered	14	3	0	17
If yes, was treatment was completed	4	2	11	17
Positive reinforcements used	7	0	8	17
Intermediate sanctions used	6	0	11	17
Petition to Revoke (PTR) filed	2	0	15	17
Incarcerated as a result of the PTR	0	2	15	17
Probationer is a sex offender	0	17	0	17
If yes, has an annual court hearing (only for sex offenders) been requested by the probationer	0	0	17	17

Noteworthy: The Department achieved compliance in one of the six review areas.

Department Response: “The department’s treatment supervisor will create a tracking sheet for all transferred youth cases to ensure compliance with statute and code by reviewing the YTH001-Active Sentenced or Remanded Clients 21 years and Younger (Yuma) APETS report run by the APETS Coordinator. PSI unit currently provides a log of all new sentenced cases to the treatment supervisor identifying those who are TY to ensure that the list maintained by the treatment supervisor remains accurate. The department is considering assigning TY cases to specifically identified caseloads to target training on code and statute to these identified staff. In the interim, the treatment supervisor will be trained on the code and statute by August 15, 2020 and develop a checklist of requirements to include screening for title 19 or 21. The treatment supervisor will then work with the existing assigned officers to ensure compliance by September 30, 2020.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the development and utilization of a New Client checklist, APETS QA Reports, the use of the Client Ticklers screen in APETS to provide notification reminders to address education and treatment needs, supervisory case file reviews, and code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

SPS Drug Testing

Pursuant to [ACJA § 6-201.01\(J\)\(1\)\(f\)](#)

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A review of 64 case records was conducted. Information in the case file and APETS revealed the following:

SPS Drug Testing		
Requirement Met	Frequency Described in Case Plan/Record	Completed as Described
Yes	21	14
No	7	7
N/A	36	43
Total	64	64
% Compliance	75%	67%
Meets Standard	N	N

Noteworthy: Not applicable

Department Response: “QCS supervisor wil[sic] complete Quality Assurance Casefile Reviews (QACR) on all staff per policy.

The department’s QACR has been updated as file.

From

Is urinalysis testing being completed at the appropriate frequency, for the appropriate substances and is the probationer's information correctly entered in TASC?

To

Is urinalysis testing being completed at the appropriate frequency, for the appropriate substances and has the officer documented this in APETS?”

Required Corrective Action: None required

Recommendation: Officer refresher training would reinforce the requirement to document the frequency of drug testing in the probationer’s case record. Case file reviews would enable supervisors to train officers on the importance of documenting the frequency of drug testing that is required by the probationer.

IPS Drug Testing

Pursuant to [ACJA § 6-202.01\(L\)\(2\)\(e\)](#)

A review of 49 case records was conducted. Information in the case file and APETS revealed the following:

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IPS Drug Testing		
Requirement Met	Frequency Described in CP/Record	Completed as Described
Yes	14	13
No	0	1
N/A	35	35
Total	49	49
% Compliance	100%	93%
Meets Standard	Y	Y

Noteworthy: The Department did an excellent job in achieving compliance in this review area.

Department response: None required

Required Corrective Action: None required

Recommendation: Officer refresher training would reinforce the requirement to document the frequency of drug testing in the probationer's case record. Case file reviews would enable supervisors to train officers on the importance of documenting the frequency of drug testing that is required by the probationer.

Drug Treatment and Education Fund (DTEF)

Pursuant to [A.R.S. § 13-901.01](#), [A.R.S. § 13-901.02](#), and [ACJA § 6-205\(G\)\(1\)c](#)

For purposes of the operational review, 30 cases that were considered DTEF cases pursuant to [A.R.S 13-901.01 \(A\)\(F\)](#) were reviewed:

DTEF Cases					
13-901.01 (A) & (F)	26				
13-901.01 (D)	4				
DTEF Cases					
Requirement	Yes	No	N/A	% Compliance	Meets Standard
Mandatory Case (As & Fs): At minimum, received substance abuse education or drug treatment	22	4	4	85%	N
AOC approved Ability to pay form completed and in file	0	30	0	0%	N
Drug treatment or education, referral made within 30 days IPS, 60 days SPS	26	4	0	87%	N
DTEF Funded	2	28	0	7%	NA
Other Methods of Payments	Yes	No	N/A	% Compliance	Meets Standard
Other methods (AHCCCS, private pay, private insurance, etc.)	24	0	6	96%	NA

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Noteworthy: Not applicable

Department Response: “DTEF Coordinator will maintain a log of all 13-901.01 (1st and 2nd) cases sentenced in Yuma County. Officers will be instructed to refer all 13-901.01 cases to the DTEF Substance Abuse Counselor who will complete code and statute requirements (e.g. assessments, ability to pay forms, AHCCCS referrals, and referrals to treatment). The DTEF substance abuse counselor will document all assessments, referrals, and treatment in APETS. The DTEF Coordinator will complete quality assurance reviews quarterly on 15% of all 13-901.01 1st and 2nd cases utilizing the DTEF APETS Report. Monthly QA will be submitted QCS.”

Required Corrective Action: None required

Recommendation: The quality assurance procedure may include the utilization of DTEF Reports/DTEF Report Card in APETS, appropriate screens, i.e. AHCCCS Tracking screen, Client Services/DTEF screen and Initiate Court Data screen, supervisory case file reviews, code and statute training. APETS case notes and other appropriate screens should be utilized to document completion of all code and statute requirements.

ACKNOWLEDGEMENTS

The Adult Probation Services Division (APSD) of the Administrative Office of the Courts (AOC) appreciated the professionalism, collaboration, hospitality, and patience of the Yuma County Adult Probation staff throughout the operational review process.

The operational review team greatly appreciates Yuma County Adult Probation Department’s willingness to participate in operational review Options Program which included verifying case file information for closed, warrants, and ISC outgoing case types. The Department also completed the personnel DCS.

Praiseworthy review areas include pre and post-employment practices, COJET, firearms, MAS, financial and statistical reports, pre-sentence, fleet management, GPS, review and acknowledgement signatures, assessment score matching supervision level, case plan signatures, low risk annual review, IPS schedules, treatment referrals, IPS drug testing, and organization of case files.

The Department submitted a thorough and complete Self-Assessment Questionnaire (SAQ), responded to all questions/requests for additional information, was open and responsive throughout the review process. The Department elicited discussion and clarification from the operational review team throughout the draft report response process.

Finally, the AOC, APSD greatly appreciates the comprehensive plan of corrective action provided by the Department for each area that received a compliance rating of less than 90%. The publication of the Department’s Final Report will close the Department’s FY 2020 Operational

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Review therefore, a follow-up is not required. Congratulations to the Department for a job well done.

COMPLIANCE SUMMARY COMPARISON

ADMINISTRATION AND MANAGEMENT		
	2016	2020
Employment		
Verification of bachelor's degree for PO	100%	100%
Verification of High School Diploma/GED for SO	N/A	100%
Before hire, National and State Criminal History Check	100%	100%
Before hire, MVD check through Arizona & other States of Residence	100%	100%
Officer Certification/COJET/Training Requirements		
8 Hours of Officer Safety Training within 30 days of Appointment	80%	100%
Completion of PO Certification Academy within 1 Year of Hire Date	100%	100%
Certification Requested by CPO within 1 Year of Active Service	100%	79%
Completion of IPS Academy within 12 months of Assignment	100%	N/A
Biannual Criminal History & MVD Check		
Criminal History Check Every 2 Years	100%	100%
Annual MVD Check	100%	100%
Pre-sentence Report		
Submitted on Time	100%	99%
COMMUNITY PROTECTION		
	2016	2020
SPS Supervision Contacts		
Minimum Level	100%	100%
Medium Level	97%	77%
Maximum Level	100%	64%
IPS Supervision Contacts		
Contacts with Probationers	90%	84%
Contact with Employers	77%	74%
Sex Offender Contacts		
Contacts with Probationers	N/A	80%
Activity to Locate Before Warrant Issued		
IPS - Warrant Requested within 72 hours	63%	25%
SPS - Warrant Requested within 90 days	96%	81%
Residence Checked	90%	92%
Collaterals Checked	76%	100%

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Employment Checked	33%	100%
Activity of Locate After Warrant Issued		
After warrant issued, a criminal history check done	64%	97%
Residence Checked	26%	42%
Employment Checked	33%	100%
Opted-In Victim Notified	30%	71%
Annual Records Check	87%	N/A
CRO Filed on or Before 91st day	7%	10%

Sex Offender Requirements		
Registration within 10 days	88%	95%
Address/Name Change Notification Change within 72 hours	64%	85%
Annual Identification	18%	88%
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation, released from custody or acceptance of incoming ISC	88%	10%
If it is not the probationer's 1st felony offense did the officer, verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	N/A	88%
Referred to Treatment	96%	100%

GPS Compliance		
GPS attribute marked in APETS	100%	100%
Probationer activated on initial report w/in 72 hours of sentencing/release from custody	100%	100%
Probationer activated upon first face to face with probation officer after Court Ordered Modification	N/A	100%
GPS rules signed by probationer	100%	100%
For high alert violations, PO initiate immediate response	100%	N/A
Responses entered in APETS within 72 hours	100%	N/A
If absconder, PTR with 72 hours	N/A	N/A

Signed Review/Acknowledgement of Terms of Conditions		
SPS	94%	98%
IPS	96%	98%

DNA Collection		
SPS		
Was DNA sample secured/transmitted/verified within 30 days of being placed on probation or acceptance of incoming	78%	0%
DNA previously secured/transmitted/verified by a non-probation agency or previous case, did the officer confirm DNA was recorded in the DPS databank within 30 days of being placed on probation, released from incarceration, or acceptance of incoming ISC	N/A	22%
IPS		

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Was DNA sample secured/verified within 30 days of being placed on probation or acceptance of incoming	49%	5%
DNA previously secured/transmitted/verified by a non-probation agency or previous case, did the officer confirm DNA was recorded in the DPS databank within 30 days of being placed on probation, released from incarceration, or acceptance of incoming ISC	N/A	14%

VICTIMS' RIGHTS		
	2016	2020
SPS		
Pre-sentence Contact	100%	100%
Notice of Changes Given	25%	100%
IPS		
Pre-sentence Contact	97%	100%
Notice of Changes Given	33%	57%

OFFENDER ACCOUNTABILITY		
	2016	2020
SPS Financials		
Court Notification if Restitution Two Months in Arrears	83%	50%
State Notified if Restitution Two Months in Arrears	N/A	50%
Victim Notification if Restitution Two Months in Arrears	0%	N/A
Officers Addressed Financial Delinquencies (includes PSF and restitution delinquencies)	N/A	45%
IPS Financials		
Court Notified if Restitution Two Months in Arrears	75%	100%
State Notified if Restitution Two Months in Arrears	N/A	100%
Victim Notified if Restitution Two Months in Arrears	0%	50%
Collection of IPS Probationer Wages	11%	N/A
Officers Addressed Financial Delinquencies (includes PSF and restitution delinquencies)	N/A	80%
SPS CR Hours		
Officers Addressed Delinquent Hours	0%	0%
IPS CR Hours		
Officers Addressed Delinquent Hours	62%	77%

CASE MANAGEMENT		
	2016	2020
SPS Cases		
Residence Verification within 30 days of Sentencing/Release from Custody for High and Medium Risk	65%	40%
Residence Verification within 60 days of Sentencing/Release from Custody for Low Risk	N/A	50%
Employment Verification	43%	100%
OST Completed within 30 Days	82%	91%

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FROST Completed per Code	40%	39%
Supervision Level Matches Assessment Scores	89%	99%
Initial Case Plan Completed within 60 Days	62%	52%
Case Plans Completed per Code	39%	35%
PO Strategies for the Probationer and PO	82%	N/A
Measurable Strategies for the Probationer and PO	70%	N/A
Completed Case Plan for Minimum Supervision Level as Required	100%	0%
OST/FROST Highest Criminogenic Need Addressed in Case Plan	95%	N/A
Case Plan Signatures	97%	95%
Low Risk Annual Review	N/A	100%

IPS Cases

Photo in File	98%	100%
Verification of Employment within 10 Days	83%	92%
Unemployed, 6 days/week Job Search	23%	19%
Verification of CR hours	23%	77%
Verification of Residence within 10 Days	64%	93%
Collection of Weekly Schedules	56%	94%
Initial Assessment (OST) within 30 Days or at PSI	91%	100%
Reassessment (FROST) per Code	40%	47%
Initial Case Plan	69%	13%
Case Plans per Code	40%	33%
Case Plan Signatures	86%	80%

Incoming ISC Cases

Were the Arizona Conditions Signed	100%	100%
Is VCAF on Arizona Terms & Conditions	20%	100%
Sending State's Terms & Conditions in File	100%	97%
Interstate Tracking Screen Completed in APETS	100%	100%
OST Within 30 Days of Arrival or Acceptance	97%	77%
Initial Case Plan Within 60 days of Arrival or Acceptance	46%	26%
DNA sample was secured from the probationer, transmitted to DPS, and verified to be in the DPS databank by the PO within 30 days of acceptance or arrival	95%	0%
DNA previously secured by another agency was verified to be in the DPS databank by the PO within 30 days of acceptance or arrival	N/A	29%
If VCAF Collections Are Not Current, Has PO Addressed	48%	38%

Outgoing ISC Cases

ISC Status Accurate (Accepted, Closed, etc.)	100%	100%
Did probationer leave with valid reporting instructions	100%	100%
Did the PO respond to violation reports within 10 business days	100%	N/A
Was DNA sample secured from the probationer and transmitted to DPS within 30 days of being placed on probation or acceptance of outgoing	97%	21%

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If it is not the probationer's 1st felony offense or if DNA was previously secured by another agency did the officer, verify DNA was in the DPS databank within 30 days of being placed on probation or acceptance of incoming	N/A	0%
Opted-in Victim Notification	7%	80%

Closed Cases

Warrant Check Before Termination	95%	100%
DNA secured, transmitted, and verified within 30 days	79%	0%
If DNA was previously secured by another non-probation agency did the officer, confirm DNA was in the DPS databank within 30 days	N/A	25%
Court Ordered Treatment Completed	91%	N/A
CR Hours Required by Statute Completed by Closure	50%	N/A
Opted-In Victim Notified of Closure	75%	100%
If Restitution Owed at Closure, Extended for Restitution	N/A	N/A
Other Financial Terms Owed at Closure	61%	N/A
CRO Entered for Outstanding Financial Balances	50%	77%

TREATMENT SERVICES

	2016	2020
SPS Cases		
Treatment Referral within 60 Days	80%	92%
IPS Cases		
Treatment Referral within 30 Days	81%	91%

Transferred Youth Cases

OST within 30 days	N/A	88%
FROST per code	N/A	50%
Initial case plan within 60 days of sentencing/release from custody/acceptance	N/A	65%
Risk score agrees with supervision level	N/A	94%
Was treatment court ordered	N/A	82%
Screened for Title 19 or 21 (AHCCCS)	14%	86%

SPS Drug Testing

Frequency Described in Case Plan	N/A	75%
Drug Tested as Described in Case Plan	N/A	67%

IPS Drug Testing

Frequency Described in Case Plan	100%	100%
Drug Tested as Described in Case Plan	100%	93%

DTEF Funded Cases

Ability to Pay Form Completed and in File	96%	0%
Drug treatment or education, referral made within 30 days IPS, 60 days SPS	100%	87%

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